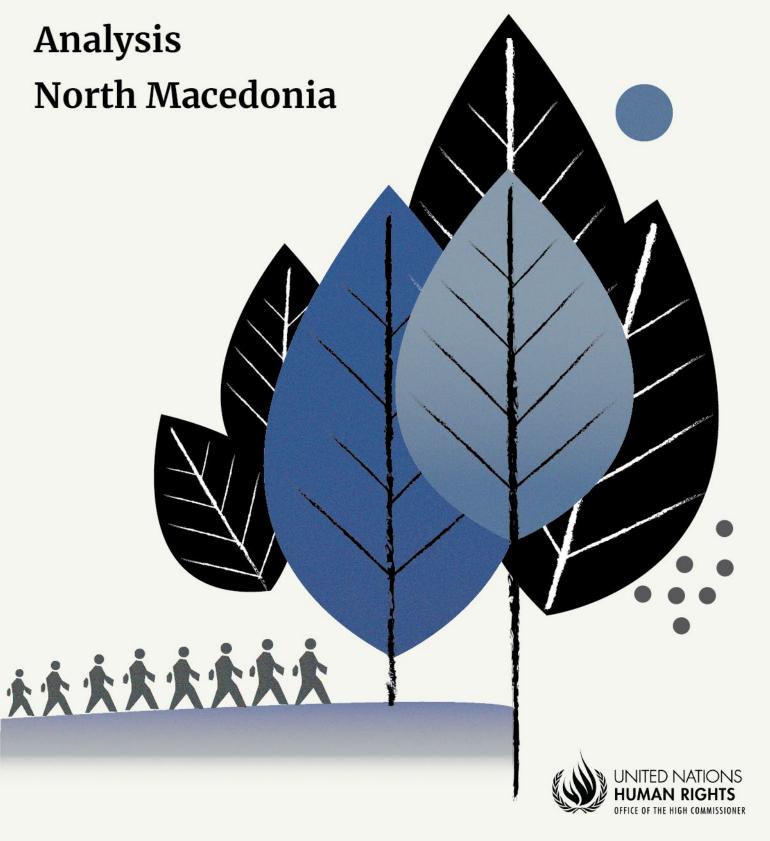


Leave No One Behind



Executive Summary	
Introduction	
Why this analysis?	2
Aims of the analysis	1
Scope of the analysis	
Limitations of the analysis	
Methodology	
LNOB analysis approach	1
Discrimination	1
Geography	1
Governance	1
Socio-economic status	1
Shocks and fragility	1
Method	1
Desk top research / Literature review	1
Primary data collection	
LNOB Analysis Findings	
Older persons	
Discrimination	
Geography	2
Socio-economic status	
Shocks and fragility:	
Governance	
Why are they left behind?	
Lack of active aging policies	
Lack of social infrastructure for older persons and persons needing care and support	
Emigration and burden on public finance	
Lack of formal mechanisms to involve older persons in decision-making	
What can be done?	
Policy and legal framework	
Institutional capacities and governance	
Education and awareness	
Youth	
Discrimination	
Geography:	
Socio-economic status	
Shocks and fragility:	
Governance	
Why are they left behind?	
Lacking rule of law leads to society of winners	
Lack of decent jobs and lower wellbeing contributes to social exclusion and eventually emigration	
Lack of transport restricts mobility and social inclusion	
5	
What can be done?	
Policy and legal framework	
Institutional capacities and governance	
Education and awareness	
Children	
Who is left behind?	
Discrimination:	
Geography:	
Shocks and fragility:	
Governance	
Socio-economic status	
Why are they left behind?	
Structural poverty	4

Lack of infrastructure	40
Social norms and discrimination	40
Inadequate governance	41
What can be done?	41
Policy and legislative framework	41
Institution building and governance	41
Awareness and education	42
Persons with disabilities	42
Discrimination	43
Geography	44
Shocks and fragility	44
Governance	44
Socio-economic status	46
Why are they left behind?	47
No systematic approach toward effective implementation of the CRPD	47
Cases of disability discrimination are rarely reported	47
Relevant laws do not adequately ensure equal access to transport for persons with disabilities	48
Persons with disabilities face challenges in access to information	48
DRR policies blind to inclusion of disability	48
No data collection system	48
Lack of an enabling environment for political participation of persons with disabilities	49
Insufficient specialized health services, and programs for prevention, early detection, diagnosis,	
intervention and rehabilitation	-
What can be done?	49
Policy and legal framework	49
Institutional capacities and governance	
Education and awareness	
Migrants, refugees, asylum seekers, persons under subsidiary protection, persons granted temporal	v
protection, stateless persons	
Discrimination	51
Geography	52
Socio-economic status	
Shocks and crises	54
Governance:	54
Why they are left behind?	54
Incomplete legal framework not aligned to international human rights standards	
Lack of alignment with the EU directives on migrants and asylum seekers	
Lack of effective integration policy	
Lack of implementation of the Guidance on reception conditions for unaccompanied children	
What can be done?	
Policy and legal framework	56
Institutional capacities and governance	
Education and awareness	
Persons deprived of liberty	57
Discrimination	
Geography	
Socio-economic status:	
Shocks and fragility	
Governance	
Why they are left behind?	
No adequate space and conditions for execution of sanctions	
Operationalization of the Rulebook on the Distribution, Classification and Placement of Convicte	
Persons in Penal Institutions is missing	
Weak rehabilitation and reintegration programmes	
Prevention mechanism is insufficiently staffed, financed and prioritized	
What can be done?	

Policy and legislative framework	
Institutional capacities and governance	63
Education and awareness	63
Persons in rural areas	64
Discrimination	64
Geography	
Shocks and fragility	65
Governance:	65
Socio-economic status:	65
Why are they left behind?	66
Societal and cultural norms	66
Geographic isolation and poor infrastructure	67
Persons working in the agricultural sector are not registered as farmers	67
Rural communities are largely underrepresented in governance structures and exclude	ded from public
and political life	67
What can be done?	67
Policy and legal framework	67
Institutional capacities and governance	68
Education and awareness	68
Roma persons	69
Discrimination	69
Geography	70
Socio-economic status:	70
Shocks and fragility	71
Governance:	71
Why are they left behind?	71
Discrimination	71
Substandard housing and infrastructure	72
Unemployment and economic dependency	
Exclusion from safety nets	72
Low education outcomes	72
What can be done?	73
Policy and legal framework	
Institutional capacities and governance	
Education and awareness	73
Women	
Discrimination	75
Geography	
Shocks and fragility	76
Governance	76
Socio-economic status	76
Why Are They Left Behind?	
Cultural and Societal Norms	77
Costly and ineffective protection from gender-based and domestic violence	
What can be done?	78
Policy and legal framework	
Implementation capacities and governance	79
Awareness and Education	80
Persons with rare diseases	81
Discrimination	
Geography	
Shocks and fragility	82
Governance	82
Socio economic status	
Why they are left behind?	
Structural poverty	83

Lack of Infrastructure	83
Social Discrimination	83
Inadequate Governance	83
What needs to be done?	
Policy and Legislative Changes	83
Healthcare and Infrastructure Improvements	
Awareness and Community Support	
Data Collection and Monitoring	84
ANNEXES	
Annex 1. Research Plan	85
Annex 2. Focus Group discussion guidelines	
Annex 3. Interview questionnaire for decision makers and practitioners	

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This publication is a collaborative effort by the Office of the UN High Commissioner of Human Rights (OHCHR) and the UN Resident Coordinator's Office, with inputs from the UN Country Team in North Macedonia. It aims to inform the stakeholders and the UN Country Team about people left behind in the development efforts and the way forward. Its findings will be used in policy making and formulating 2026-2030 Sustainable Development Cooperation Framework.

Special appreciation is extended to OHCHR Surge Project Team and Tatijana Temelkoska, Human Rights Adviser for their support and guidance, and especially to the consultants Marija Risteska and Stojan Misev for their expertise and work on the development of the publication.

Executive Summary

North Macedonia is committed to achieving the Sustainable development goals. The Leave No One Behind (hereinafter LNOB) analysis aims to: (i) identify who is being left behind; (ii) why persons and groups are left behind; (iii) provide actionable recommendations on how to decrease their vulnerability to being left behind and contribute to development. The findings are intended to provide actionable recommendations on what should be done to decrease their vulnerability to being left behind and contribute to development. Its findings are intended to be used to inform the new Cooperation Framework (United Nations Sustainable Development Cooperation Framework (UNSDCF 2026-2030) between the UN Country Team and the Government of North Macedonia.

Aging, declining fertility rates and migration lead to depopulation, while longer life expectancy of women leads to feminization of the North Macedonia population. The country has made slow progress in education and health outcomes, leading to better performance on the Human Development Index. However, the prolonged economic crisis, corruption and poor governance determine its lower economic growth, investment, and tax revenues which cross analyzed with the demographic shifts puts pressure on the financial viability of pension, health and social security systems. Inflation tends to hit those worst off the hardest and they may be in a situation when they need to choose between paying for food or medication or utilities, etc.

The analysis looks at 11 target groups operationalizing the Leave No One Behind (LNOB) principle as a holistic assessment framework. It analyses how discrimination, geography, governance, vulnerability to shocks and crises and socio-economic status affect the vulnerability of different groups being left furthest behind. Using secondary data analysis

and qualitative primary data, the analysis identifies that most vulnerable to be left behind are:

Women and girls in vulnerable situations – most vulnerable are women and girls living in rural areas who face multiple and intersectional discrimination and limited access to employment, education, healthcare, sexual reproductive and health rights, ownership and exclusion from decision making (identified through analysis of the overall status of women, youth, persons living in rural areas and older persons). Older women with dementia, strokes, paralysed, partially or completely impaired vision and / or **disability** are also identified as vulnerable to be left furthest behind as they face barriers in physical and institutional accessibility to healthcare, education, and employment; and are not heard and consulted due to lack of systematic mechanisms. Women survivors of violence against women and domestic violence face ineffective protection, limited access to justice, compensation and reintegration. Within this group, Roma women and girls face multiple deprivations, intersecting and discrimination. Roma girls are particularly vulnerable to early marriages. Women stateless, refugees and asylum seekers. The returnees from Daesh in Syria are particularly vulnerable as some cannot obtain ID cards and exercise their rights, and cannot fully, or at all access the labour market.

<u>Vulnerable men</u> – most vulnerable are **older men in rural areas**, **with**(*out*) *dementia*, *strokes*, *paralysed*, *partially or completely impaired vision* who live in isolation and without essential services and at times also medication provided, and being left without daily support and assistance due to shortage of hospices. Persons with disabilities, especially persons with intellectual disability, and persons deprived of liberty are in vulnerable situations as they face limited access to inclusive education, lack employment and specialized support, and have insufficient access to specialized educational resources. Among the ethnic minority groups, most vulnerable are the Roma, specifically older Roma, LGBTIQ+ Roma and Roma with disabilities in vulnerable situation to be left behind as they face multiple discrimination and marginalization, leading to exclusion from essential services and economic opportunities. Finally, working age asylum seekers and returnees from Daesh in Syria are in vulnerable situation as they cannot access the labour market, cannot obtain ID cards and cannot exercise their health, education, and social protection rights, thus being left without future prospects for development.

<u>Children</u> – the analysis highlights that while Macedonia has a significant child population, challenges particularly socio-economic divides, ethnic disparities, and the lack of data on vulnerable groups (e.g., children with disabilities) exacerbate inequalities. Most vulnerable are the **poor children in urban compared to those in rural areas**, as the wealth quintile largely influences their educational attendance and future development prospects; **children with disabilities** suffer from exclusion due to absence of proper facilities and support in schools, while lack of comprehensive data impedes development of policies and allocation of resources to meet their needs; **Roma children, and in**

particular Roma street children, are highly vulnerable to exploitation and exclusion, reaching lower outcomes across sectors (education, health, protection) mostly due to lower access to social services and discrimination.

<u>Youth</u> – **young Roma** face discrimination on multiple grounds and experience intersectional discrimination, and sometimes their access to education, healthcare and other basic services is limited due to poverty and severe material deprivation. Stigmatization of **young gay men** results in physical violence or those who are **HIV+** are not provided with dentistry and other health services. Finally, particularly vulnerable to be left out in this group are the **young stateless individuals and unaccompanied minors (migrants or refugees)** who cannot exercise the right to education due to lack of age assessment and education placement and also problems in accessing health services.

The analysis identifies the root causes why these groups are being left behind. These include negative social norms, stereotypes, prejudice, and stigma as well as inadequate legal protection. Only if root causes leading to unequal treatment and discrimination are tackled, the vulnerability of these groups can reduce. Policy and legal frameworks need to be fully aligned with the country's international human rights obligations and EU law as the country is aspiring to join the EU. Their effective and efficient enforcement and implementation in practice, free from undue influences and corruption, and coupled with good governance and rule of law are deemed as contributing factors for advancement of the rights and inclusion of persons in situations of vulnerability in the country's development.

The lack of disaggregated data in the 2021 census is a serious obstacle in identifying and addressing the pressing challenges and needs of groups left behind, including the adequate planning and programming. There are numerous data gaps, and the most critical one refers to persons with disabilities, which impedes policy planning and addressing their specific needs, including the needs of survivors of violence due to underreporting. Overall, the existing data collection and monitoring mechanisms are oriented towards collecting current process data, but not disaggregated data on the progress made towards desired development outcomes. This is expected to change under the new public finance management system, to be implemented as of January 2025 which requires result-oriented program budgeting.

The analysis identifies the most marginalized population groups in North Macedonia and explores any related development challenges and root-causes of their marginalization. It also identifies key measures to be prioritized. Specific recommendations for each group in vulnerable situations are included under separate chapters. Summary of key recommendations for to the UN Country Team (hereinafter, UNCT), and recommendations for the Government and National Human Rights Institutions is given below.

Recommendations for the UNCT in North Macedonia

- Prioritize in 2025 support for the Government and the National Statistical Office in building capacities for generating disaggregated data, and also, to the extent possible, with reference to the already collected 2021 census data.
- Work with the National Statistical Office and the National Human Rights Institution (Ombudsman Institution) to produce more granular data on groups left behind or at risk of being left behind.
- Signa Memorandum of Understanding with the National Human Rights Institution to ensure a human rights-based approach in data collection.
- Monitor and track national budget allocations and expenditures, in cooperation
 with the Government, aimed at addressing the situation and needs of persons
 facing marginalization and exclusion. This workstream should include efforts to
 ensure participatory, both national and local budgetary processes, by including
 representatives of the most marginalized population groups as well as raising
 awareness of the obligation to progressively realize economic, social and cultural
 rights.
- Prioritize institutional capacity building and strengthening for persons-centered
 assessments, compliant age and disability assessments for education to ensure
 adaptation and easier access to education, health and social protection services
 for the groups in vulnerable situations.
- Prioritize support to national efforts aimed at developing a comprehensive approach and strengthening multisectoral and inter-agency coordination and cooperation to address the needs of the most marginalized members of society.
- Strengthen Develop effective and broad consultation mechanisms with the local community groups and translate their feedback in the design of the local services to adequately respond to the needs of the most vulnerable. Such consultation mechanisms could also be used to inform the development of the new Cooperation Framework.
- UN in North Macedonia to lead by example by making concerted efforts to employ, consult, feature in outreach persons with disabilities and the benefits of their full integration in society (also in line with the UN Disability Inclusion Strategy).
- Support the Government in developing systemic and sustainable approaches to active ageing and reverting the emigration trends or developing an effective migration policy with emersion programs.
- Prioritize delivery of gender sensitization training for police officers, local administrative staff, centres for social work staff, and members of the judiciary as well as other stakeholders at national level on the forms of discrimination, with practical examples on ethnic-profiling, stigmatization and unfair treatment of women, Roma, LGBTI+, HIV+, refugees and migrants, including on the impact of social exclusion on vulnerable groups.

- Invest in targeted education/awareness raising activities for recognising and reporting discrimination, deprivation and human rights violations for members of marginalized groups, empowering them to claim their rights.
- Encourage positive media coverage and public narratives that portray marginalized population groups accurately and positively, which can amplify their voice and facilitate their inclusion and empowerment.
- Prioritize capacity building and awareness raising within the private sector across
 the country to decrease stigmatization of young women, persons with disability,
 Roma, LGBTI+, ex-convicts and refugees, and ensure smooth integration in the
 labour market and society.

Recommendations for the Government

- The Government should ensure 2021 disaggregation census data that will assist shaping evidence based, long term and sustained policies and measures on addressing the needs of all groups and persons in vulnerable situations.
- Continue upholding human rights obligations while prioritizing efforts to address
 the situation of population groups furthest behind with a view to eliminate
 barriers and create equal opportunities for exercising the whole spectrum of civil,
 economic, social, cultural and political rights, and enhance accountability for
 human rights violations.
- Revise specific pieces of legislation or public policies requiring urgent review (e.g. anti-discrimination legislation, sectoral national strategies and action plans, especially concerning the situation of persons in vulnerable situation that are either furthest behind or run the risk of being furthest behind.
- Undertake policy and legislative changes especially addressing contemporary challenges and trends and ensure respect for the right to work, safe working conditions, fair wage and formalization of work to provide a safety net for the most vulnerable.
- Address the prevalent high unemployment, inactivity and informal work rates among the groups left behind, especially women, youth, persons living in rural areas, Roma and others which deems to have huge potential as human capital for the economy and development of the country. Their inclusion in the labour market or care economy can compensate for the labour shortages and boost the economic and overall development of the country.
- Implement targeted measures for better infrastructure development, transport services, and establishment of local kindergartens and care centers for older persons.
- Implement reforms to address sweeping demographic changes, optimizing effective and efficient use of the national budget to ensure universal, quality social services.

- Institutionalize outreach mechanisms to ensure vulnerable population are informed and supported to access the relevant social services and social protection benefits/schemes.
- Continuously increase the knowledge and raise awareness of marginalized groups about their rights as well as about relevant processes and mechanisms available to them in cases of violations.
- Enhance the application of non-custodial measures and strengthen the probation system to decrease the number of persons in the prison and detention facilities, as well as strengthen rehabilitation programs.
- Introduce paid apprentice's programs for young doctors, psychologists and psychiatrists in the penitentiary system.
- Provide an enabling legal environment, as well as human and financial resources for the independent functioning and implementation of the opinions of the Ombudsman Institution and the Commission for Prevention and Protection against Discrimination.
- Advance the access to free legal aid and reduce the costs of legal proceedings for persons in vulnerable situations.

Recommendations for the National Human Rights Institution - Ombudsman

- Strengthen the enforcement mechanisms of the Ombudsman, ensuring that government bodies and public institutions adhere to its opinions and recommendations, particularly regarding the rights of marginalized groups and those left behind.
- Expand regional offices in rural, underrepresented and minority-dense areas to ensure equitable access to services. Consider creating mobile teams/units to reach those in remote regions who cannot access and enjoy their basic rights.
- Establish internal criteria for prioritizing cases involving persons in vulnerable situations, ensuring these cases are handled with priority and in a fast-tracked procedure.
- Strengthen the cooperation with the Commission for Prevention and Protection against Discrimination, various ministries, civil society, think tank and academia to streamline efforts in addressing systemic barriers faced by marginalized groups.
- Publish regular reports on marginalized groups' status, with a focus on good practices, gaps and how their rights should be improved.
- Continue the awareness raising campaigns and knowledge building of duty bearers and the general public on the Ombudsman mandate.
- Engage proactively and submit reports to international and regional human rights mechanisms.

Recommendations for the Commission for Prevention and Protection Against Discrimination

- Review the compliance of the current anti-discrimination legislation with international human rights and equality standards and provide adequate recommendations.
- Improve internal structures and organization to promote specialization and increased knowledge of staff who could process discrimination cases on specific grounds and other tasks. Strengthen the enforcement mechanisms that will ensure the authorities and public sector entities to adhere to the Commission's opinions and recommendations, particularly when marginalized groups are involved.
- Expand advocacy and outreach by opening regional/local offices to ensure equitable access to rights, especially to persons in vulnerable situations.
- Establish a systematic, proactive monitoring of discrimination cases, especially concerning persons in vulnerable situations.
- Ensure data collection and analysis is disaggregated to identify trends and target interventions.
- Promote easy-to-use, multilingual, and accessible channels (e.g., mobile apps, online platforms, in-person hubs) for reporting discrimination, especially for vulnerable groups.
- Strong advocacy and campaigns in rural and disadvantaged areas to educate individuals about their rights under anti-discrimination laws and how to seek protection.

The implementation of these recommendations will advance North Macedonia's implementation of the obligations under international human rights law, including implementation of recommendations of the international and regional human rights mechanisms, as well as advance the implementation of the 2030 Agenda, its SDGs and the promise to leave no one behind.

Introduction

According to the last population census, the total population of North Macedonia is 1.836.713 citizens, out of which 49.6% are men and 50.4% women. Most of the population 61% lives in urban areas 1.131.356 (out of which 552.952 men and 578.404 women), and 39% or 705.357 in rural areas (out of which 358.135 men and 347.222 women). The ethnicity structure is as follows: Macedonian 1.073.299, Albanian 446.245, Turk 70.961, Roma 46.433, Serbian 23.847, Bosnians 16.042, Vlach 8.714 and 151.172 from other ethnicities. There are 94.412 persons with disabilities, i.e. 42.209 are male and 52.203 women.

The child population aged 0-17 years is 368.731 (48% females; 52% males), or 20% of the population. According to the 2021 Census, 140.436 children in North Macedonia are under the age of six. Using the probable rate of 12.5% (world statistics show that 10-15% of children from birth to six have developmental delays), as many as 17.554 children may need early childhood intervention services.¹

Similar to the countries in the region there is a trend of depopulation, aging and feminization of the middle-aged and older population.² North Macedonia ranks 78th among 189 countries in the latest 2021 Human Development Index, improving its previous ranking of 83, but with decline in scores (the country scored 0.779 in 2018, and 0.770 in 2021), meaning that at least four years of progress have been lost.³ The Gini coefficient of inequality shows a low score of 33.5 as of 2019 (the latest available data),⁴ indicating less inequality and presenting the country as outperformer in the region. The gender equality index is seconding this finding as the two editions of the assessment show increase of scores (62 points in 2019 and 64.5 points in 2022) with changes observed in the domains of Power (+6.0), Knowledge (+2.8) and Money (+2.2).⁵

In the total population aged 15+ from the 2021 census data, 95.8% are literate, 3.2% are illiterate, and for 3% it is not known. In terms of educational level: 23.192 citizens have no education, i.e. 6988 men and 16204 women; 62.129 have not completed elementary education or 20.009 men and 42.120 women; 423.456 have completed elementary education or 182.375 men and 241.081 women; 672.375 completed secondary education or 378.949 men and 293.426 women; 263.349 have university degree or 122.958 men

¹ Source: Situation Analysis on Early Childhood Intervention in North Macedonia

² State Statistical Office (2022), Women and Men in North Macedonia: A statistical portrait of trends in gender equality, Skopje

³ UNDP (2023) *HDR 2022 Pathway through uncertain times*, Skopje. Available at: <u>Human Development Index 2022 – North Macedonia Pathway Through Uncertain Times | United Nations Development Programme (undp.org)</u>

⁴ Gini index - North Macedonia | Data (worldbank.org)

⁵ EIGE (2022) *North Macedonia Gender Equality Index* Available at: <u>North Macedonia | European Institute for Gender Equality (europa.eu)</u>

and 140.391 women; 29.654 have postgraduate degree or 12.858 men and 16.796 women; 6.037 have doctoral degree or 3.114 men and 2.923 women.

Currently, 182.124 students have enrolled the primary education, of which 52% are male and 48% are female, while trends in secondary education are changing as only 67.278 students have enrolled, even though it is mandatory for all finishing primary education. The gender balance significantly changes in tertiary education, and in 2023, out of 6.993 graduates, 66% were women and 34% were men.⁶

The 2023 Economic Freedom Index of the Heritage Foundation ranked North Macedonia 32nd out of 44 countries in the European region, making its economy the 56th freest globally. The Macedonian economy showed a low growth in the period 2018-2021 at an average quarter-on-quarter GDP change rate of 1.22%. The low growth was mainly influenced by the COVID-19 crisis, which impacted the economy with a 16.4% contraction in the second quarter of 2020, followed by a slow recovery⁷. According to the State Statistical Office, the real GDP growth rate in 2022, compared to 2021, was 2.2%.⁸ The current account deficit increased to \$810 million in 2022, and the inflation rate amounted to 18.8% as one of the highest in Europe⁹ creating an economic crisis and inevitably strongly contributed to poverty rates for which unfortunately there is no current data. General monetary poverty is at 21.8%, while child poverty is significantly higher at 30.3%.

The Human Development Report 2021 shows index of 39 (out of 100) clearly displaying the link between corruption and poor governance as determinants of lower economic growth, investment, and tax revenue. In 2022, the country received its poorest score on Transparency International's 2022 Corruption Perceptions Index, which ranked the country 85th out of 180 countries. Corruption contributes to poor governance and North Macedonia experienced the largest decline in the region on the latest Nations in Transit Report 2024.¹⁰

⁶ State Statistical Office (2024) MAKSTAT data base Available at: PxWeb - Select table (stat.gov.mk)

⁷ Regional Cooperation Council (2023), *Women's entrepreneurship in North Macedonia: stocktaking on constraints and good practices*, Sarajevo. Available online: <u>Regional Cooperation Council | Women entrepreneurship in the Western Balkans: Stocktaking on constraints and good practices (rcc.int)</u>
⁸ Gross Domestic Product 2022, Available at: <u>State Statistical Office: Gross domestic product of the</u>

⁸ Gross Domestic Product 2022, Available at: <u>State Statistical Office: Gross domestic product of the Republic of North Macedonia in 2022 - preliminary data</u>

⁹ Bertelsmann Stiftung, *BTI 2024 Country Report — North Macedonia*. Gütersloh: Bertelsmann Stiftung, 2024

¹⁰ North Macedonia Nations in Transit Report 2024, Available at: <u>North Macedonia: Nations in Transit 2024 Country Report | Freedom House</u>

Why this analysis?

The overall objective of this analysis is to support the UN Country Team (UNCT) in North Macedonia and inform the 2024 Common Country Analysis (CCA) and propose a set of actionable recommendations for the UN system and its partners in North Macedonia to feed in the development of the new Cooperation Framework (UNSDCF 2026-2030). According to the Sustainable Development Report 2023/24 for Europe, the country ranks 32 of 34 countries with a score of 57.3/100 when it comes to delivering on the promise to leave no one behind.¹¹

The analysis aims to provide advice on measures that need to be taken, including strengthening policy and legislative frameworks, which can further contribute to improving these scores, assist the advanced implementation of the 2030 Agenda and accelerate the follow up on the recommendations issued to North Macedonia by international human rights mechanisms.

Aims of the analysis

This analysis aims to (i) identify who is being left behind in North Macedonia; (ii) analyse why these persons and groups are left behind; (iii) provide actionable recommendations to the UNCT, the authorities and human rights institutions on how to decrease their vulnerability and address their marginalization.

Scope of the analysis

The analysis looks at 11 selected population groups, departing from 2020 Common Country Analysis and recommendations of international and regional human rights mechanisms and reports of civil society. Selection was made based on the following reasons that affect the situation of vulnerability:

Table 1 Target groups of the LNOB analysis

Children

Due to their development stage, children are at particular risk and very vulnerable to deprivations, with impact that extends into adulthood. Children are often underrepresented in decision-making and their missed development opportunities impact the future generation/ society. Multiple crises in the recent years have eroded development progress with a significant increase in child poverty and low and declining education outcomes compared to their peers in Europe.

¹¹ UN (2024) Europe Sustainable Development Report 2023/24 (sdgindex.org).

Youth	Age-based discrimination in employment and limited economic opportunities; limited access to quality education and vocational training; lack of meaningful participation in decision-making processes, immigration.
Older persons	Ageism and prejudices; exclusion from decision making processes; insufficient pensions and unfavorable financial situation; inadequate access to health, social and other services. Low living standard; increased vulnerability during health and economic crises.
Disadvantaged women and girls	Gender based discrimination and social norms that urge subordinated position of women; underrepresentation in decision making processes; limited access to educational, employment, health, financial and other services; gender pay gap in the labor market; increased vulnerability during economic, environmental and health crisis; ineffective protection against violence and human trafficking.
Persons deprived of liberty, including children	Stigma and discrimination that affect their reintegration into society; exclusion from participation in the society and political life; limited economic opportunities and increased risk of poverty and reoffending; risk of torture, degrading and inhuman treatment and punishment; limited access to education, vocation and health services in prison and post-release support; increased vulnerability during health crises.
Migrants, refugees, asylum seekers, persons under subsidiary protection, persons granted temporary protection, stateless persons	Xenophobia and discrimination impeding access to education and employment; exploitation; exclusion from participation in society; lack of access to essential services (health care, free legal aid etc.).
Ethnic minorities (Roma, Egyptians)	Persistent discrimination and prejudices in all areas; marginalization in decision-making processes; extreme poverty and inadequate living conditions; lack of access to basic education, employment, health (SRHR), social and other services.
Persons with disability	Ableism and social prejudices; higher poverty rates; exclusion from political and social life; inadequate access to inclusive education, health and support services; increased vulnerabilities during emergency crises. Psychosocial conditions not officially recognized as impairment Persons with intellectual disability are often deprived of legal capacity and have no free decision-making power. Lack of accessible facilities and insufficient support services prevent children with disabilities from participating fully in educational and social activities.

Persons living in rural areas	Discrimination in policy making and resource allocation; poor infrastructure and access to basic education, employment, health, social and other rights and services; higher poverty rate and limited economic opportunities; increased vulnerability to natural disasters, environmental and economic crises. Building a strong human capital is the foundation of a healthy, cohesive and prosperous society, and a key development challenge for a country like North Macedonia which is losing its (child) population, and years of development progress due to subsequent global economic shocks.
LGBTI+	Homophobia and transphobia; limited access to civil, political, health, social, economic and cultural rights and other services; increased vulnerability during social and economic crises.
Persons living with HIV and sex workers	Persons living with HIV: stigma and discrimination, exclusion from social, economic, and educational opportunities. They often experience barriers to accessing healthcare, including antiretroviral treatment, and may suffer from poor mental health due to societal attitudes. Sex workers: marginalized and subjected to legal, social, and economic discrimination. They face violence, exploitation, and limited access to healthcare and social services.
Persons with rare diseases	Delayed diagnosis, lack of appropriate medical treatment, and limited support services. Due to experiencing rare health conditions, they may face isolation and a lack of understanding from both the public and healthcare providers.

Using the LNOB analysis and the five factors framework as per the relevant UN Sustainable Development Group guidance,¹² the analysis identifies the persons and groups that are 1) most affected by multiple, often compounding forms of deprivation, disadvantage and discrimination, and/or, 2) suffering the most extreme deprivation, disadvantage or discrimination in one or more areas.

Limitations of the analysis

The analysis was conducted in the context of the following limitations:

First, this analysis does not include a comprehensive assessment of the situation of these groups at national level, given that a national level representative sample was not used for the study, but rather small-scale qualitative research, including 8 focus group discussions and 20 in-depth interviews, aimed to identify those who are left furthest behind among disadvantaged groups.

¹² UN (2019) Sustainable Development Group guidance https://unsdg.un.org/2030-agenda/universal-values/leave-no-one-behind

Second, the use of qualitative data imposes limitations, because researchers were able to gather the perceptions and opinions of the groups and not factual objective data, even though, using this approach helped to identify the real perceived situation and experiences of the target groups, and to develop recommendations that effectively respond to that situation.

Third, the analysis is based on generated official statistics from the 2021 Census. Given that the analysis does not include disaggregated data by smaller subgroups as well as various factors determining their situation, the use of quantitative data in the analysis is limited.

The key findings of the analysis are presented in chapters dedicated to population groups that are left behind or at risk of being left furthest behind. Each chapter includes general information, LNOB analysis that explores the factors and root causes of marginalization, and actionable recommendations which can inform policy development, governance changes as well as education and awareness raising activities.

Methodology

LNOB analysis approach

The analysis uses the LNOB approach focused on countering discrimination and inequalities (often multiple and intersecting) that undermine the agency of persons as rights holders. Persons are left behind when they lack the choices and opportunities to participate in and benefit from development progress.

Therefore, this analysis operationalizes the Leave No One Behind as a holistic assessment framework. This framework suggests five intersecting factors essential for understanding who is being left behind and why, and shape solutions accordingly. These factors are:

Discrimination

Persons are left behind when they experience exclusion, bias, unfavorable treatment or mistreatment in laws, policies, access to rights, public services and social practices due to their identity (ascribed or assumed, and primarily relating to their gender, but also age, income, ethnicity, social status, religion, disability, sexual orientation, nationality, as well as, refugee, displaced or migratory status). ¹⁴

¹³ UNDSDG Operationalizing Leaving No One Behind Operationalizing Leaving No One Behind; UNSDG

¹⁴ Under the Macedonian law (art 5) the following are considered as grounds of discrimination: race, color, origin, national or ethnic origin, sex, gender, sexual orientation, gender identity, belonging to a marginalized group, language, citizenship, social origin, education, religion or religious belief, political belief, other belief, disability, age, family or marital status, property status, health status, personal qualities and social status, or any other ground.

Geography

Persons are left behind or exposed to risks of vulnerability and inequity when they are unable to exercise or have limited access to human rights and freedoms on an equal footing, when denied social and economic opportunities, human security and/or quality public services based on their place of residence. Contaminated or degraded natural resources, legacies of deprivation and/or inequity in infrastructure, transportation and/or public services that limit the choices, mobility and opportunities; and the climate conditions, latitude, desertification and/or proximity to high-risk areas such as floodplains or steep embankments can leave persons isolated and vulnerable to setbacks.

Governance

Poor, disadvantaged and marginalized communities tend to have the least say in decisions that affect them and are least likely to be included in the data and evidence that governments use to allocate resources and shape policies. The enabling democratic environment that allows citizens' participation, provides institutionalization of feedback mechanisms that inform on responsiveness of policies, measures and budgets to the different needs of persons and especially the most disadvantaged communities are assessed.

Socio-economic status

Persons get left behind when they lack the opportunities and capabilities to earn an adequate income, accumulate wealth or otherwise fully and equitably participate in their economy and society. A person's ability to get out and stay out of poverty, in all its dimensions, is shaped by the economic rules, policies and public services open to them.

Shocks and fragility

Persons are left behind when they are vulnerable to risks related to violence, conflict, displacement, large movements, environmental degradation, natural hazard induced disasters and other types of climate events, or health shocks, such as epidemic outbreaks. The impact of these shocks and situations of fragility can cause entire communities, subregions or countries to be left behind, and they can also often spill over national borders.

Method

The following methods were applied throughout the analysis process.

Desk top research / Literature review

Secondary data sources were gathered and analyzed to identify population groups at risk of being left behind (as right holders) and the overall national approach to improve their enjoyment of human rights and the overall situation (as duty bearer). The identifiable categories include:

 Relevant international conventions ratified by North Macedonia, including UDHR, ICCPR, ICESCR, CEDAW, CRPD, CAT, etc.), and reports and recommendations of international human rights mechanisms.

- 2030 Agenda for Sustainable Development and its Sustainable Development Goals
- 2020 North Macedonia's Voluntary National Review.
- European conventions ratified by the country, including the Council of Europe's European Convention on Human Rights and Fundamental Freedoms, Convention on the Prevention and Protection against VAW and Domestic Violence.
- EU Country Reports; US Human Rights Report on North Macedonia, etc.
- National Development Strategy (NDS).
- Legislative and policy documents related to development policies, implementation of the 2030 Agenda, and civil, political, social, economic, and cultural rights affecting especially persons at risk of being left behind, such as national strategies, action plans, laws and other documents.
- Statistical reports and other documents related to demography, education, labor market, health, social protection etc. such as the 2021 Census of the State Statistical Office and other official documents.
- Reports and research of national CSOs and international organizations regarding the situation of different groups of persons at risk of being left behind.
- Publicly available budget documents related to allocation of funds for implementation of the 2030 Agenda and especially measures for persons at risk of being left behind, such as annual budgets and financial reports of ministries, national human rights institutions and judiciary.

Primary data collection

Primary data was collected from persons at risk of being left behind as rights holders, organizations representing their rights and interests, state authorities, and other stakeholders in the capacity of duty bearers. Primary data was collected by using qualitative methods: focus group discussions, interviews and questionnaires.

The following focus group discussions were organized:

Table 2: LNOB analysis Focus Group Discussions

Group	Number of participants	Structure
Youth	10 participants Age 17-29 8 women	Representatives from youth organizations (Organized youth organization, MOF, Youth can, Megjashi, Luludi, Equalis), youth workers, Roma youth, LGBTI youth,
Older persons	2 men 6 participants +2 representatives of	Representatives of Crven Krst; Association of pensioners: older
	older persons organizations Age 75-85	Association of pensioners; older persons from the Day center in Shtip

	5 women					
	3 men					
Persons deprived of liberty	6 participants; representatives of organizations working with the target group and academia	MYLA, HOPS, HERA, Pleiades, University "Ss. Cyril and Methodius"				
	6 women					
Migrants, refugees, asylum seekers, stateless persons	4 participants All representatives of organizations working with the target group 4 women	MYLA, La Strada				
Roma	11 participants all representatives of Roma community	Sex: 5 men; 6 women; Age: mixed age groups; Employment status: all unemployed, some were social welfare beneficiaries. Disability: 2 persons with permanent disability to work.				
	Consulted CSOs: Ro Shuto Orizari; Stan					
Women (Macedonian and Roma)	8 representatives of women in vulnerable situations (unemployed, rural, survivors of violence or human trafficking)	Ethnicity: 5 Macedonian and 4 Roma; Age: mixed age groups. Place of living: urban and rural. Employment: unemployed or low incomes.				
		Consulted CSOs: Association Majka from Kumanovo				
Women (Albanian)	6 representatives of women in vulnerable situations (unemployed, rural, survivors of violence or human trafficking)	Ethnicity: All Albanian; Age: mixed age groups. Place of living: urban and rural. Employment: unemployed or low incomes.				
		Consulted CSOs: Women Forum from Tetovo				
Persons living in rural areas	11 representatives of vulnerable groups living in rural areas (unemployed, agriculture workers, social care beneficiaries)	Ethnicity: 6 Albanian, 3 Macedonian, 2 Turk; Age: mixed age groups; all residents in rural areas; Employment: most of them were unemployed and engaged in tobacco farming.				
		Consulted CSOs: Stanice PET Prilep				

LNOB Analysis Findings

Older persons

According to the last census, 55.256 persons are aged 75, over 35.083 are aged 80, and over 21.001 persons are aged 85, while 51 persons are 100 years old. The gender structure for each five-year age groups reveals there are more women within the older persons group as shown in the Table 3.

Table 3: Total population of older persons, per 5 years' age groups and gender, in %

Age group	Total	Male	% of total	Female	% of total
75 - 79	55 256	24 180	43.7%	31 076	56.3%
80 -	35 083	14 918	42.5%	20 165	57.5%
85+	21 001	8 502	40.4%	12 499	59.6%

Source: SSO (2022) Population Census 2021

The ageing of the population relies on the fact that in 2021, there were 45% more citizens over the age of 60 than in 2002. Of the persons aged 60+, 14.6% live in single households, which is almost three times more than the national average. The percentage of elderly women who live alone is twice the percentage of single men. Feminization and aging trends are expected to continue as the population projections by 2070 show that the number of persons aged 65 or above would reach 364.6 thousand or 15.2% more than in 2022.

The long-term nature of migration movements abroad has caused a relatively large increase in the population of older persons. WHO assesses that by 2050 every fourth person in North Macedonia will be over 65 years old.

In terms of the geographic location, older persons are found in urban centers (over 65% in all 5-year age groups live in urban centers) than in rural areas (about 35% live in rural areas) as observed in Table 4 below. The gender balance has a slightly different pattern from the total population.

¹⁵ SSO (2023) Population projections of the Republic of North Macedonia by 2070, available online: https://www.stat.gov.mk/publikacii/2023/Proekcii 2070 en.pdf

Table 4: Total population of older persons, by age group, gender and urban/rural location

Age group	Total	Urban	%Male of total	%Female of total	Rural	%Male of total	%Female of total
75 - 79	55 256	35 827	42.5%	57.5%	19 429	46%	54%
			(n=15238)	(n=20 589)		(n=8 942)	(n=10 487)
80 - 84	35 083	22 605	41.7%	58.3%	12 478	44%	56%
			(n=9 423)	(n=13 182)		(n=5 495)	(n=6 983)
85+	21 001	13 972	66.5%	33.5%	7 029	41%	59%
			(n=5 612)	(n=8 360)		(n=2 890)	(n=4 139)

Source: SSO (2022) Population Census 2021

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Who is most vulnerable to be left behind?

Older women – who are sometimes forced into early retirement, are more exposed to poverty in old age Older persons with dementia or impacted by strokes, paralysis, partial or complete vision impairment – left out of daily support and assistance; shortage of hospices, available only in four urban locations
Older persons in rural areas – live in isolation and are left without services and sometimes without medication

Discrimination: Direct discrimination against older persons rarely exists. The analysis revealed one such example: The Law on Pension and Disability Insurance,¹⁶ in Article 18,¹⁷ provides for two retirement regimes for women and men. However, employers interpret this article in different ways. While some see it as the right of women to retire at 62, others interpret it as women must retire at 62. In principle, earlier retirement puts women in a more disadvantaged position, as their pension entitlements will be lower than those of men¹⁸ and may result in women being more exposed to poverty in old age.

¹⁶ Law on Pension and Disability Insurance Official Gazette no. 98/2012; Official Gazette no.162/2012; Official Gazette no.15/2013.

¹⁷ Namely, "an employed person with a pension plan can retire when he is 64 years of age and she is 62 years of age and has at least 15 years of pensionable service".

¹⁸ The number of years of pensionable service is the basis for calculating pension entitlements, as provided in Article 20 of the Law on Pension and Disability insurance

The focus group discussion revealed the perception that older persons are discriminated

against because even though they want to work, no labour opportunities exist without losing their pension benefits. Considering the high inflation, being able to access additional sources of income and be engaged in paid work could significantly improve the well-being of pensioners and close the gap in labour market shortages.

"They do not feel safe, cannot maintain hygiene, and there are cases when some defecate in their wheelchairs due to feebleness, but also due to lack of support".

Older persons with dementia, those impacted by

strokes, paralysis or partial or complete vision impairment, especially if they are left without daily assistance and support are in vulnerable situation to be fully left behind, mainly because of poor health. *Often, they are not able or do not know how to seek help or care from competent institutions.* ¹⁹

Geography: Availability of long-term care for older persons is limited to the urban centers in Skopje, Prilep, Bitola, Shtip and Kumanovo.

The lack of personal assistance and support through day-care centres or home care services in rural municipalities exacerbates the vulnerability of older persons, compared to those living in urban areas. Many of them are faced with extremely poor living conditions, lack of adequate food, means to cover the costs of living and sometimes lack of access to needed medication. Geography, per se, is a risk factor for older persons in rural areas, as they get isolated due to the location where they live. Small towns and rural areas are exposed to demographic decline, which leads to changed quantity and quality of locally provided services. The local self-governments costs to provide these services increase, posing a challenge to service delivery.

Socio-economic status: Due to the permanent nature of emigration, there is an increasing number of households of older persons who find it difficult to cope with their daily tasks and responsibilities. ²⁰ *Inflation impacts negatively on the purchasing power, as the pension levels are very low*. ²¹ Economic crises, increased prices and inflation hit older women more than older men due to structural gender inequalities on the labour market, as determinants of the number of years in employment women have and the level of salaries they are paid. This is confirmed by WHO, which noted that 29.3% of older persons in North Macedonia were severely materially deprived ²² in 2018, compared to 4.7% in the EU. This is relatively similar to the share of the total population of severely

¹⁹ Focus group discussion, 22 August 2024

²⁰ Older persons and access to health care in North Macedonia. Copenhagen: WHO Regional Office for Europe; 2021.

²¹ Focus group discussion, 22 August 2024

²² Older persons and access to health care in North Macedonia. Copenhagen: WHO Regional Office for Europe; 2021

deprived persons in the country (30.5%). Also, a larger proportion of older women were facing severe difficulties in being able to afford basic foods and services (31.5%) than older men (26.6%) in 2018.²³ The adopted Law on Social Security²⁴ provides for additional 100 Euros of support for the most vulnerable, adjusted to the inflation rate, however, it is often insufficient for a dignified life. The WHO analysis a reduction in households with out-of-pocket payments for health services, resulting from improved access to services following a range of policy measures to extend public health insurance coverage to very poor households (2009 and 2012) and low-income pensioners in 2013 (inpatient care).²⁵

Older persons are left without the traditional multi-generational support scheme in old age due to youth migration and the demand for care and support services and older persons' homes is surging. Until recently, the state left the market to respond to this demand, further exacerbating the already dire financial situation of older persons considering the costs of privately provisioned services. According to the Ministry of Social Policy, Demographics and Youth there are around 40 licensed privately managed institutions that provide services for older persons in the country²⁶. The terminally ill are in worse condition considering that there are only four hospices in the country located in four of the eight regions.

Shocks and fragility: Older persons are characterized with low adaptability to crises and shocks and more than other population are in need of psycho-social support, which is scarcely provided in the country and generally available only in bigger urban centers. Old age also brings long-term medical conditions, such as frailty, dementia, disability, dependence or social isolation resulting in the need for mental health support services, which are scarce and even though older persons have health insurance, they still face problems in accessing them.

Governance: Lacking personal support to engage with daily tasks outside the home and participate in the municipal social life, is deemed a key limitation leading to isolation of older persons. Also, the access to information is limited, which increases the risk of being left behind. Even though most of them have TV and are satisfied with the available channels, a vast majority of older persons face greater limitations regarding access to online information (for instance, 95% of older persons in Shtip do not have internet access or cannot afford this service).²⁷ WHO also highlights that "there is a lack of formal

²³ Ibid

²⁴ Law on Social Security, Official Gazette no.104/2019. Available online: <u>28.5 zakon SZ Starilica.pdf</u> (mtsp.gov.mk)

²⁵ Dimkovski V, Mosca I. Can persons afford to pay for health care? New evidence on financial protection in North Macedonia. Copenhagen: WHO Regional Office for Europe; 2021.

²⁶ List of private social protection institutions for older people(mtsp.gov.mk)

²⁷ CRPM/GIZ (2021) Social mapping in Shtip

mechanisms to involve persons, communities and civil society organizations in a systematic way, both at national and local levels".²⁸

Why are they left behind?

Lack of active aging policies

North Macedonia entirely lacks a systematic approach to ensuring and promoting active aging. Active aging allows persons to realize their potential for physical, social, and mental wellbeing throughout the life course and to participate in society according to their needs, desires and capacities, while providing them with adequate protection, security and care when they require assistance. There are good economic reasons for enacting policies and programmes that promote active ageing in terms of increased participation and reduced costs in care.²⁹ There is a disconnection between the policies that ensure active aging and divert the negative impact of ageing of societies. Older persons are rather isolated and when they are no longer able to support and protect themselves, the realization of their needs and rights are left to the family and market to primarily(iii) meet their social, financial and physical security needs and (rarely) in state provided institutions that ensure protection, with dignity and care.

Lack of social infrastructure for older persons and persons needing care and support

The following institutions in North Macedonia currently provide social protection of older persons: "Gerontological Institution – 13th November", department Mother Theresa – Skopje with 111 residents; Public Institution "Zafir Sajko"- Kumanovo with 185 residents; Public Institution "Kiro Krstevski Platnik" – Prilep with 151 residents and Public Institution "Sue Ryder"-Bitola with 164 residents. Also, there are 40 licensed private institutions that currently provide accommodation for older persons. Licenses are issued by the Ministry of Social Policy, Demographics and Youth. Professional supervision of both public and private social protection institutions for older persons is done by the Public Institute for Social Affairs - Skopje. Although it is still not meeting the entire needs of the country, the involvement of the private sector has contributed to

²⁸ Older persons and access to health care in North Macedonia. Copenhagen: WHO Regional Office for Europe; 2021

²⁹ WHO (2002) Active ageing: a policy framework. Copenhagen, Denmark.

reducing the gap between supply and demand in the facilities for elderly care and significant improvement in the institutional protection of older persons.³⁰

Emigration and burden on public finance

The active population living abroad is younger than the population in the country, which entails a greater burden on the pension system, based on paid contributions and increased pressure on public finances. The old-age dependency ratio - a key indicator of demographic pressure - has surged. North Macedonia's ratio increased from 11% in 1990 to 22% in 2023. This trend, driven by longer life expectancy³¹ and lower birth rates, suggests that the number of retirees will continue to grow, placing additional pressure on already stretched pension system. Addressing these challenges requires comprehensive reforms that extend beyond the pension system alone.

Lack of formal mechanisms to involve older persons in decision-making

There is a disconnection between the perceptions of health providers and older persons in terms of the level of their involvement in decision-making.³² There is a lack of formal mechanisms to involve older persons, communities and civil society organizations in a systematic way and both at national and local levels.

What can be done?

Policy and legal framework

- Develop active aging policies that will (i) keep risk factors for disease low; (ii)
 ensure full participation of older persons in socioeconomic, cultural and spiritual
 activities, and (iii) meet their social, financial and physical security needs and in
 state provided institutions that ensure protection, with dignity and care.
- Amend the Labour Law to decrease formal discrimination of retiring women; and allow for flexible work arrangements for older persons so that they do not result in losing pension benefits.

Institutional capacities and governance

³⁰ Suncica Dimitrijoska, Svetlana Trbojevik, Vladimir Ilievski Demographic aging of population and the social protection system in the Republic of Macedonia, European Journal of Social Sciences Education and Research, Volume 2, Issue 4

³¹ Life expectancy has increased in average to 74 years, where life expectancy for men is 71.9 years and 76.5 years for women.

 $^{^{32}}$ Older persons and access to health care in North Macedonia. Copenhagen: WHO Regional Office for Europe; 2021

- Undertake person-centered assessments regarding the realization of human rights to health and social protection for older persons, focusing on their access to health or social care services. Support the development of personalized care plans.
- Consultations with community groups and other local services to identify opportunities for expanding community engagement and ensuring meaningful participation of older persons in decisions that affect them.
- Formalize the relations between health and social services and the community, by involving youth to deliver support services to the older persons.
- Implement a systematic approach to active ageing needs, linking policies that decrease risks of diseases; provide active participation of older persons in social, economic, cultural societal activities, and provide protection and care with dignity when they are unable to take care of themselves.

Education and awareness

• Increase level of awareness for the benefits of active aging and support for active aging policies to be adopted and promoted.

Development challenge related to older persons - viability of pension systems

Demographic shifts threaten the financial viability of pension systems, which are already burdened by high spending. Pensions take up 70% of the social protection system as compared to 40% in OECD.

Youth

Young persons aged 15-29 years old account for 18 per cent of the total population of the country. They mainly live in the urban areas with 57% (relevant for the age groups 15-19 and 20-24 years).³³ As they grow older, young persons tend to migrate to urban centers which generally offer more and better work opportunities and services (59% of those aged 25-29 years live in urban areas). Gender balance is noted in terms of 5-year youth age groups.

Table 5: Youth by 5-year age groups, gender and urban/rural

Age group	Total	Male	Female	Urban	Rural
15-19	104 035	53 405	50 630	59 879	44 156
20-24	106 553	54 525	52 028	60 826	45 727
25-29	116 145	59 354	56 791	68 969	47 176

Source: Population census, 2021

³³ Youth is defined as persons aged 15 to 29 under the Macedonian legislation, while UN strategic documents define it as age group of 15 to 24.

In respect of labor market, data show that for the age group 15-19, when young persons attend compulsory education, the numbers of inactive women and men are at par. However, as the age increases, the labour market activity of men significantly increases, compared to women (age group 20-24, only 44% are inactive men, while 56% are inactive women; age group 25-29, around 43% of the total inactive are men, and the rest are women). The employment figures show that there are twice more employed men than women in age group 15-19; but the employment status of women and men in the older age groups is at par.

Table 6: Working age population by age group, gender and activity

	Total inactive	male	female	Total employed	male	female	Total unempl oyed	male	female
15-19	89 515	50%	50%	166	70%	30%	72	66.6%	33.4%
20-24	51 863	44%	56%	1 015	57%	43%	197	53.8%	46.2%
25-29	32 290	43%	67%	1 650	49.5%	50.5%	236	50.4%	49.6%

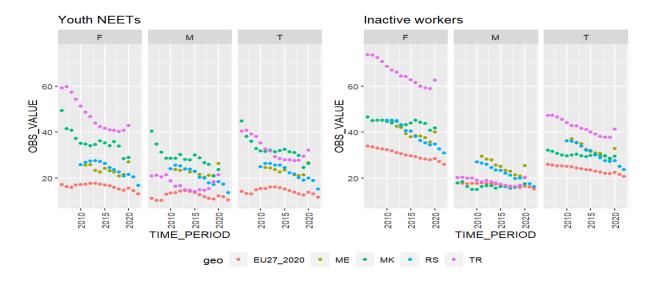
Source: Population census, 2021

Eurostat data contradict the census data, according to which the proportion of inactive female workers is higher when compared to the significant numbers of youth not in education, employment or training (see figures below). "This may largely be reflective of generational differences of many women choosing not to work after a certain age." Despite the growing youth employment figures over the time, North Macedonia has not converged with the EU average, which has largely remained stable (same for the period of the Euro-crisis between 2008 and 2014). Male youth employment figures are stronger than female counterparts, Macedonia's female youth employment rate over time has been considerably low, and in 2020 the country had the lowest rate among other IPA countries, except Turkey.

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³⁴ Eurofound (2024) Promoting social cohesion and convergence: Young Persons in the Western Balkans and Türkiye, Dublin.

Figure 1 Youth NEET and inactive workers



Source: Eurostat, 2023



Who is most vulnerable to be left behind?

Roma youth – face discrimination on multiple grounds, meaning they experience intersectional discrimination **Young women living in rural areas** -not given equal opportunities for certain jobs **Young gay men living with HIV** – stigmatized, without adequate access to healthcare

Discrimination: Roma youth face discrimination and social exclusion on the grounds of ethnicity/race, gender, sexual orientation and gender identity or gender expression, socio-economic status, class and education. Most often, they face discrimination on multiple grounds, thus experiencing intersectional discrimination. They are discriminated against and exposed to derogative narratives and negative stereotypes by the general public, state and local institutions, being banned access to certain cafes and pools, but there are many instances of indirect hidden discrimination when they access justice or services.³⁵ The young gay men living with HIV are stigmatized, not provided with adequate healthcare (including dentistry) when the duty bearers learn of their HIV status or they are asked to provide medical supplies at own cost (additional gloves, syringes and etc.).³⁶

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³⁵ Focus group discussion youth, 22 August 2024

³⁶ Interview with Margini, 27 August 2024

Geography: LGBTI+ youth living in rural areas face more stigma and prejudice compared to urban areas, such as bulling at school and verbal and sometimes physical violence at home; while this trend of unacceptance and violence in recent years has shifted to public spaces, limiting their opportunities to education, professional development and accessing the labour market, and often forcing them to migrate to Skopje or out of the country. In smaller communities, young persons of diverse gender identities are often subject to prejudices when attempting to enter the labour market and are deprived of chances to get a job due to lack of experience.

Young women living in rural areas who lack equal opportunities for jobs that are not perceived as 'female jobs' are in most vulnerable situation.³⁷ The absence of regular transport services connecting villages and cities and between cities, limits the opportunities for young persons to participate in after-school activities or other sports, cultural and societal activities. "Availability of school-related transport determines their participation, and they often miss school activities." ³⁸ The percentage of girls (15-19 years) who are married or in civil union (2019) accounted for 7% in rural areas and 5% in urban areas. The percentage of young women aged 20-24 who were married/in civil union before the age of 18 (early marriage) is in average 8% nationally and 46% in Roma settlements. ³⁹ Early marriages are a contributing factor to having low education and economic outcomes and are increasing the risks of child trafficking. ⁴⁰

Socio-economic status: "When young persons decide to live and study independently, they run the risk of low socio-economic status, poverty as the student standard is very low".⁴¹ Young persons from towns other than Skopje, Shtip, Bitola, and Tetovo (university centers) are most disadvantaged. Considering the limited offer of student housing, they are forced to pay for rent, which is challenging and impacts their socio-economic status because of high inflation. "Gay boys staying in high school dormitories, where they experience verbal and physical violence, are in particularly vulnerable situation".⁴² Apprenticeships offered to young persons in higher education provide for low quality jobs, no personal development plans, at least 8 hours shifts and very low pay. "Therefore, young persons prefer vocational education and trainings rather than university/faculties that provide work experience within the 6-month educational program that is well paid".⁴³ However, the employment rate of recent graduates is quite low and entirely depends on

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³⁷ Focus Group discussion, 22 August 2024

³⁸ Focus Group discussion, 22 August 2024

³⁹ MICS2019

⁴⁰ According to the data collected by the mobile teams for identification, assistance and referral of potential victims of trafficking and victims of trafficking, during 2018-2023, 56% of all identified domestic child survivors of trafficking were Roma, out of which 83% were Roma girls' victims of sexual exploitation and forced marriages.

⁴¹ Focus group discussion youth, 22 August 2024

⁴² Interview with Margini, 27 August 2024

⁴³ Focus group discussion youth, 22 August 2024

the entrepreneurial skills of the graduates. There is a prevailing perception among young persons that EU provides access to better quality jobs, while personal development plans and skills development are not available at home. Young persons with disabilities have the fewest opportunities for economic integration as social entrepreneurship remains unregulated, and information on jobs within protected company's system is not available.

Young persons in alternative care are in particularly vulnerable situations. The absence of a defined exit strategy and inadequate re-integration programs and community-based services linked to alternative care systems result in children frequently aging out without proper preparation for independent living. The situation is especially precarious for Roma children, who are disproportionately likely to end up homeless or living on the streets.44

Shocks and fragility: Health and support services in times of crises, shocks and emergencies are of paramount importance and the offer is currently limited to all population groups. These services are not on a positive list and are not offered for state subsidized prices and for many they are inaccessible, especially young persons in the age group 15-24 who live in poverty (according to SSO 29% of youth in this group were poor in 2018). This situation exacerbates the vulnerability of LGBTI+ youth, given the persistent stigmatization against this community (demonstrated by daily attacks and societal unacceptance), resulting in a "paranoia culture, very low self-esteem and poor mental health". 45 Some of the young LGBTIQ persons do not expect to live beyond 30 years. 46 Some ad hoc prevention and reintegration measures are provided during crises. However, youth with disabilities who remain dependent on their parents due to lack of sufficient programs for empowerment, care and support remain in most vulnerable situation.

Governance: Overall, young persons are not adequately represented in decision-making, despite some progress made at school and local level and also during elections. However, this does not necessarily mean that their views are adequately considered, and the measures taken therefore rarely respond to their needs. "Adopted solutions fail to be adequate for young persons, young persons are ceremonially included, are less politically educated and cannot voice their problems and possible solutions in ways that would allow to be directly translated in policies".47 The feeling they are not consulted, or that nothing will change despite their participation, pushes youth towards apathy. The government, on the other hand, fails to make as much effort as necessary to change this perception. The reshuffle of the government might present opportunities away from the abyss, if the

⁴⁴ ERRC(2023) Promising change: Romani children in state care in North Macedonia, available online: https://www.errc.org/press-releases/promising-change-romani-children-in-state-care-in-northmacedonia

⁴⁵ Interview Equalis, August 22nd 2024

⁴⁶ Focus group discussion youth, 22 August 2024

⁴⁷ Focus group discussion youth, 22 August 2024

focus shifts on how the administration functions and not on legal and administrative matters.

Why are they left behind?

Lacking rule of law leads to society of winners

"The prejudices and discrimination they face on the counter bares them from realization of rights; often, priority given to more well off people, with social capital and connections which leaves the most vulnerable further behind".

Lack of real oversight and internal control mechanisms, allowing for cheating, abuse, fraud, and bribery, have been identified as strongest contributors to a situation when access to services and exercising of fundamental rights is possible only with money and connections. Young persons by default have less social capital and lower income and therefore are unable to meet the expectations that they compensate for the lack of public spending, for example in healthcare, resulting in resource scarcity. Redress mechanisms are insufficient, duty bearers

lack implementation capacities and accountability with regard to enforcement of already existing norms and standards (e.g., HIV status is not recorded in the health card to prevent refused service delivery to patients with this status). Furthermore, "lack of access to information for right holders presents a potential risk of corruption in services delivery, as it can pose a barrier to a particular service." A systematic approach in tackling corruption to address the risk factors common denominators such as strong political influence in the public sector; low rate of sanctioning corruptive behavior; inconsistent regulations; low level of enforcement of integrity measures; insufficient transparency, oversight system and control mechanisms in the public sector is lacking.⁴⁹

Lack of decent jobs and lower wellbeing contributes to social exclusion and eventually emigration

Youth unemployment rate in North Macedonia is continuously dropping, however, it is still almost double the unemployment rate of the general population (see Table 7). This is mainly because youth "continue to face many challenges, they lack decent jobs, feel

⁴⁸ NDI (2022) Corruption and Quality of Public Services in North Macedonia: Assessing Healthcare and The Civil Registry Through Public Opinion Research, Skopje. Available at: <u>Final - NorthMKdemresilience analysishealtcharemysteryshoppingjan'23 (1) (1) (1).pdf (ndi.org)</u>

⁴⁹ EU (2024) 2024 Rule of Law Report Country Chapter on the rule of law situation in North Macedonia, Brussels. Available at: <u>e7197a43-7f00-4eac-b02d-818ac71345f0 en (europa.eu)</u>

socially excluded and experience lower well-being".⁵⁰ The fact that the activity rates of youth are lower than the rate for the general population shows that the youth who are in education and training are not working or enter the labour market later than the youth in the EU.

Table 7: Activity, employment, unemployment rates (youth, vs. general population)

Age group:	15-29	General population
Activity rate:	44.8	52.3
Employment rate:	33.6	45.4
Unemployment rate:	24.9	13.1

Source: 2023, MKD State Statistical Office

The likelihood of a person becoming an NEET also has a gender dimension, with young men less likely to become NEET compared to young women.⁵¹ The young person with caretaking or family obligations is more likely to become inactive, especially low-skilled young women living in less developed rural areas. The World Bank notes that the percent of unemployed is slightly higher among LGBTI persons (13.5 percent) than the general population (12.0 percent), particularly among LGBTI persons who experienced higher levels of workplace discrimination and stigma.⁵² Joblessness, long job queues, low paid jobs and widespread politicization have all contributed to an accumulation of dissatisfaction among young persons⁵³ cumulating to an inclination to emigrate by their 30s.⁵⁴

Lack of transport restricts mobility and social inclusion

⁵⁰ Eurofound (2024) *Promoting social cohesion and convergence: Young Persons in the Western Balkans and Türkiye*, Dublin.

⁵¹ ILO (2022) Young NEET Mapping and policy advise, Skopje. Available at: MKD NEET-Mapping-and-Policy-Proposals.pdf (socijalendijalog.mk)

⁵² Flores, Andrew; Koehler, Dominik; Lucchetti, Leonardo; Cortez, Clifton; Djindjić, Jovana; Kuzmanov, Lidija. 2023. The Economic Cost of Exclusion Based on Sexual Orientation, Gender Identity and Expression, and Sex Characteristics in the Labor Market in the Republic of North Macedonia.

⁵³ ETF (2021) How Migration, Human Capital And The Labour Market Interact In North Macedonia, Available at: migration_north_macedonia.pdf (europa.eu)

⁵⁴ Petreski, M. and Petreski, B. (2015). 'Dissatisfied, feeling unequal and inclined to emigrate: Perceptions from Macedonia in a MIMIC model'. Migration Letters 12(3), pp. 300–14

Transport connections with the rest of the world can be easier and cheaper than travelling in North Macedonia. Most of the bus lines connecting rural areas with the urban areas have been discontinued and some cities lost regular bus connection with the capital. The data from the State Statistical Office

"The government subsidizes cheap flights but not public transport. It is cheaper to go to Rome than to Ohrid."

shows that the number of passengers in 2022 was twice lower than what in 2018 (see Table 8). Also, there is no regular rail transport, leaving young persons disconnected from the social, cultural and economic opportunities offered in bigger cities and in Skopje. Transport is only available to/from school which limits other activities and inclusion of youth who live in other than urban areas. This results in centralized activities and opportunities, offered only in Skopje, and putting those away from the center in a disadvantaged position.

Table 8: Carried passengers in road passenger transport, by regions, by years

	Number of passengers per Year in,000				
Region	2018	2019	2020	2021	2022
Republic of Macedonia	7727	5826	2794	2451	3036
Vardar Region	1159	1349	825	189	211
East Region	633	489	318	354	494
Southwest Region	645	582	216	253	295
Southeast Region	492	342	167	246	311
Pelagonia Region	968	780	286	272	286
Polog Region	763	306	221	218	340
Northeast Region	745	472	203	308	333
Skopje Region	2322	1506	559	612	766

Source: State Statistical Office, 2023

Feeling excluded and without a voice

The Youth analysis shows that 64.6% of young persons feel that their interests are not represented in politics (remaining 25.9% responded that they are partially represented)⁵⁵, while confirmed by another analysis, where 8 out of 10 young persons think they are not heard and that decision makers "care little or not at all about them and

⁵⁵ Latkovic, M., Borota Popovska, M., Naumovska B., Starova, N. (2024) Youth analysis in North Macedonia, FES. Skopje

their needs.^{56, 57} Even though progress was made in young persons' representation, either through youth councils at local level and in the school management through student associations, with the exception of high schools where the student representation is still missing; there is very little consultation and formal response to the needs of young persons. The representation does not seem enough as only 14.6 per cent of the candidates in the 2024 Parliamentary elections, according to the Westminster Foundation of Democracy analysis, were from the 18-29 age group. However, the largest number of candidates (n=88) from this age group were placed last (listed on the 16th to 20th place on the ballot) with the least chances to be elected. This resulted in youth being 2.5 per cent of the total number of elected members of Parliament (n=3).⁵⁸

What can be done?

Youth must have equal access to basic rights (education, health, employment, connectivity, digitalization, public, economic, cultural and political life, etc.) and social inclusion. This can be achieved only if the root causes that result in unequal treatment and discrimination are tackled.

That refers to negative stereotypes, prejudice, stigma etc. The focus group discussions also revealed certain gaps, which can be tackled by taking the following measures:

Policy and legal framework

- Ensure full implementation of the National Youth Strategy 2023-2027 and 2023-2025 Action plan that stipulate specific programs for young persons, social inclusion, non-discrimination, etc.
- Amend the Law on Secondary Education and regulate the compulsory membership of a student representative in the school management board, giving more decision-making power to young persons.
- Amend the Labour Relations Law to regulate that compulsory personal development plan is designed for every new employee, on the job mentorship

⁵⁶ Neziri, D. Kosturanova, D. Galevski M., Socio-political participation of young persons in North Macedonia, WFD. Available online: <u>WFDanalysis</u>: <u>young persons in North Macedonia are largely dissatisfied with their place in the society | Westminster Foundation for Democracy WFD analysis</u>: <u>young persons in North Macedonia are largely dissatisfied with their place in the society | Westminster Foundation for Democracy</u>

⁵⁷ Neziri, D. Kosturanova, D. Galevski M., Socio-political participation of young persons in North Macedonia, WFD. Available online: <u>WFDanalysis</u>: <u>young persons in North Macedonia are largely dissatisfied with their place in the society | Westminster Foundation for Democracy WFD analysis</u>: <u>young persons in North Macedonia are largely dissatisfied with their place in the society | Westminster Foundation for Democracy</u>

⁵⁸ WFD(2024) Youth in elections: Analysis of the position of youth in 2024 parliamentary elections, Skopje, Available online: <u>Youth on elections 2024 MK.pdf (wfd.org)</u>

- schemes are implemented and new forms of work are introduced with a view to improve quality of jobs for youth.
- Amend the Health Program to provide mental health services as part of the positive state subsidized list of services.

Institutional capacities and governance

- Work with municipalities to support the creation and development of local youth councils and any other form of youth participation.
- Address the resource limitations by increasing public sector investments in healthcare, education, social protection, including the equipment procurement, professional staff, and wages to disincentivize public service providers from abusing their positions for personal gain.
- Encourage the private sector to actively support youth inclusion by implementing
 inclusive hiring practices, providing mentorship and development opportunities,
 and collaborating with public and community initiatives to improve access to
 resources, reduce stigma, and foster equitable opportunities for marginalized
 youth.
- Invest in improved internal controls, oversight, and the integrity system as a
 whole, including transparency processes regarding the access to information
 through highly visible signs that outlines processes, fees, and frequently asked
 questions in order to protect human rights.
- Provide for subsidized transport for youth, not only related to school attendance.

Education and awareness

- Provide gender sensitization training for police officers, local administrative staff, centers for social work staff at local and national level and education on the forms of discrimination, with practical examples on ethnic-profiling, stigmatization and unfair treatment of young women, youth with HIV, LGBTI+ youth and young Roma as well as the results of social exclusion of these vulnerable youth groups.
- Provide adequate education/raising awareness activities for recognising and reporting of discrimination, violations of human rights, etc.

Development challenge related to youth - emigration

According to World Economic Forum, North Macedonia has the highest levels of brain drain in the world, and with majority of youth wanting to emigrate, North Macedonia loses significant human capital that is basis for economic growth and can put in jeopardy the current educational, health and social protection systems in place.

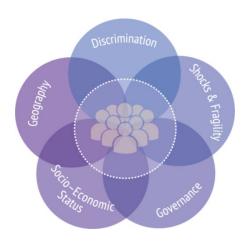
Children

Children (0-17 age) account for 20% of the population in the country or 368.731 children, i.e. 178.603 female and 190.128 are male. The downward trend in this population group persists and is expected to continue due to a significant drop in the number of births, from 27.761 in 2002 to 18.073 in 2022 and the low fertility rate (1.5 children per women, well below the population replacement rate of 2.1) according to the State Statistical Office.

Nearly two thirds of the children, or 62.8% live in urban areas, while a substantial portion or 37.2% reside in rural areas. Child population is ethnically diverse, with significant proportion of Macedonian children (48.1%), Albanian 31.2%, Turkish 4.9%, Roma 3.9%, and other minority groups. In 2021, there were 2.275 children with different types of disabilities, ⁵⁹ including mobility impairments - 349 (15.5%), vision impairments - 428 (19%), hearing impairments - 89 (3.9%), communication difficulties - 491 (21.8%), and other difficulties - 898 (39.8%). While 93% of students (approximately 171.000) are enrolled in formal education, a significant percentage of children, particularly from poor families and minority groups, are at risk of dropping out. The healthcare system, while generally accessible, entails certain regional disparities.

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⁵⁹ There is no accurate and up-to date data on children with disabilities.



Children in poverty (urban and rural areas)

face reduced access to healthcare, education, and social services from the earliest age. Despite ongoing reforms only 12% of children receive child allowance, while 30% live below the poverty line.

Children with disabilities suffer from exclusion due to absence of proper facilities and support in schools, as well as lack of comprehensive data, which hampers policy development and resource allocation for their needs.

Roma children are highly vulnerable to poverty and exclusion, reaching lower outcomes across sectors due to lower access to social services and discrimination.

Children are highly exposed to violence, including violent discipline and peer violence.

Discrimination: Discrimination against Roma children is widespread, with 85% of Roma children not completing secondary education due to unequal treatment by schools and social services. Social exclusion and prejudices limit their access to healthcare and education leading to further marginalization. Only 45% of schools are equipped for children with disabilities, which leaves room for institutional discrimination against children with disabilities, as lack of accessible facilities and insufficient support services prevent these children from participating fully in educational and social activities.

Geography: School branches, managed by the administration of the central primary schools, are intended to bring education to more remote urban or rural communities. These make up two thirds of school buildings, yet only serve 10% of the students. Remote schools absorb a disproportionate share of the education budget, and yet, they lack adequate infrastructural conditions for good quality learning. Furthermore, due to the low number of students in such school, 43% of students are forced to learn in combined grades classrooms that lack adequate peer interaction and learning competition, perpetuating the cycles of poverty. Early childhood education centers are underfunded, leaving more than half of children aged 3-5, particularly the most vulnerable without access to preschool programs that are crucial for their cognitive and social development and long-life learning opportunities. Healthcare access is 35% lower in rural areas, leaving children in a vulnerable situation and excluded from the public healthcare system. Street children are concentrated in urban areas, but due to living in transient or informal

habitats, they are geographically excluded from formal education, social services and child protection programs. Lack of stable residence makes it difficult to seek assistance.

Shocks and fragility: About 30.3% of children live below the poverty line, making them highly vulnerable to economic shocks, such as family health crises or job loss. These shocks disproportionately affect children's access to food, healthcare, and education, particularly in marginalized communities. Children affected by domestic violence, family breakdowns, or neglected children are often left without access to essential protection services that are under-resourced and lack child and gender centered response and trauma-informed approach. Children are often victims of violence. The data from the Ministry of interior show that this trend is on the increase. In 2022, there were 1.104 registered children as victims of violence by the police, vis-a-vis 471 in 2020 and 222 in 2018. Crisis has been noted in the country regarding the number of reported cases of shared photos/videos of sexually abused children, which in 2023 amounted to 12.310 cases, showcasing an increase of 50% from 2021 when 6.045 were reported to the Cyber Tipline Data (missingkids.org). Over 60% of cases of violence against children are underreported, especially for those among marginalized groups. Violent discipline is widespread, 73.1 % of all children exposed to violent discipline methods, and even higher for Roma children of 82%. The prevalence is also higher among children with functional difficulties (85.9%). Additionally, increased peer violence and bullying within school environments are evident, with 19% of students reporting that they experienced bullying at least a few times a month in 2022, according to PISA 2021 results. This represents an increase from 2018 KAP study, when 17.7% of female students and 18.5% of male students reported exposure to bullying. The prevalence of physical fights during the same period was also significant, involving 36% of male students and 15% of female students. Bullying in schools takes various forms, including physical, verbal, psychological, sexual, economic, and cyberbullying.

Governance: Consultation mechanisms and practices of substantial involvement of children in decision-making processes are lacking, and this is mainly limited to ad hoc initiatives. Further, "traditional" institutional barriers negatively influence the situation of children in the country. Only 3.7% of GDP is allocated to education, below the regional and EU levels, with high inefficiencies in the internal utilization, leading to low learning outcomes. Social work centers have 30% fewer resources than required to meet the needs of children at risk of violence or neglect, leaving them inadequately protected. There is weak governance and low level of coordination between social services, education, and local governments, which leaves many marginalized children underserved. Gaps in the enforcement of child protection policies particularly affect children with disabilities, street children, girls exposed to early marriage and those in poverty.

Socio-economic status: includes factors like job instability, and lack of investments in family-friendly policies, contribute to population decline and migration. Poverty remains a major barrier to accessing essential services and children in the lowest quintile

systematically lag behind all in access to social services across sectors. Children from low-income families, especially Roma children, face higher dropout rates. Children in rural areas are 34% more likely to experience extreme poverty while children in urban areas are more likely to suffer from material deprivation. The World Bank detects over 30% of the population in Polog and Northeastern regions lives below the \$6.85 per day poverty line; the Southeastern, Eastern, and Pelagonia regions have poverty rates under 10%. There is pessimistic outlook on economic progress, since 66% are dissatisfied with the economic situation, and 40% believe the economic situation will worsen.⁶⁰

Why are they left behind?

Structural poverty

Poverty levels in Macedonia remain high, particularly in ethnic minority communities. 30.3% of children live below the poverty line, with rural households experiencing 34% higher poverty than urban ones and urban household experiencing higher rates of material deprivation. Nearly 80% of Roma children live in extreme poverty, driven by limited economic opportunities and weak social protection systems. Systemic inequalities, such as poor job availability, exacerbate these issues, limiting access to healthcare and education.

Lack of infrastructure

Rural areas are severely underserved, lacking critical infrastructure for healthcare, with fewer paediatricians and specialists, leading to delayed medical treatment. School serving remote urban and rural areas absorb a disproportionate share of the education budget, while lacking adequate infrastructural conditions, equipment and teaching aids for good quality learning. The differences in spending among rural schools indicates inefficient and inequitable allocation of resources between schools – the municipalities with highest expenditures per student spend almost 15 times more compared to the municipalities with lowest expenditures per student. Healthcare in rural areas is similarly inadequate.

Social norms and discrimination

Discrimination is a significant barrier for Roma children, with 85% having little or no access to formal education. Children with disabilities also face significant exclusion, as only 45% of schools are equipped to accommodate their needs. Discrimination leads to higher rates of violence and neglect in these groups, with 60% of children with disabilities experiencing some form of violence. Roma children are at increased risk of abuse and

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⁶⁰ RCC (2022) Balkan Barometer Survey, Sarajevo. Available online: Balkan Barometer | Welcome (rcc.int)

exploitation that exacerbates their vulnerable situation. Early marriages that are prevalent among Roma girls result in missed education, early childbearing and health related risks, limited employment, empowerment and earning opportunities, which negatively impacts the next generation of children.

Inadequate governance

Weak governance and insufficient policy enforcement contribute to the exclusion of marginalized children. Funding gaps in critical sectors like education and child protection remain a significant issue, with only 3.7% of GDP allocated to education and high inefficiency in public spending resulting in low learning outcomes for children. Additionally, the lack of coordination between local governments and social services creates gaps in service delivery, allowing inequalities to persist, especially in rural and minority communities.

What can be done?

Policy and legislative framework

- Expand social protection programs to cover children living below the poverty line, both in urban and rural areas and among ethnic minorities like the Roma. Expand the coverage and adequacy of child benefits, support outreach programs and appropriate case management and support, including assist children with disabilities through financial and healthcare support.
- Update inclusive education policies to ensure all schools can accommodate and appropriately support children with disabilities by 2030. Focus on improving physical access, specialized resources, and teacher capacities.

Institution building and governance

- Enforce anti-discrimination laws in schools, particularly for Roma children, to ensure equal access to education.
- Strengthen child protection laws to safeguard against violence and neglect. Strategically invest in parenting programs and services for families that are designed to promote positive outcomes for children. Ensure proper implementation and penalties for non-compliance with mandatory reporting of violence against children.
- Increase education funding to align with regional standards, raising the budget to at least 5% of GDP and prioritize optimization of the primary school network and adequate management of human resources and investments to improve the quality of education.

- Strengthen intersectoral coordination by improving collaboration between local governments, education, and social services. Focus on identifying and supporting marginalized children, such as street children and children in poverty.
- Institutionalize outreach of social services to ensure identification and support for vulnerable/marginalized children, ensuring they have access to a comprehensive package of services supporting their full inclusion.

Awareness and education

- Implement comprehensive awareness rising campaigns to reduce discrimination against Roma children and children with disabilities, focusing on reducing stigmas and promoting inclusivity.
- Strengthen capacities and resources of frontline workers (teachers, health professionals, social workers) on inclusive education, health and child protection.
- Systematically implement community outreach programs to engage low-income families in education and healthcare, utilizing mobile units or local centers for direct service provision where relevant.

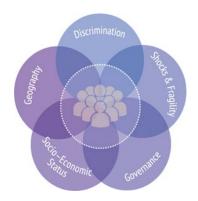
Persons with disabilities

94.412 persons with certain type of disability live in North Macedonia,61 which represents 5% of the total resident population in North Macedonia. Disability tends to be more prevalent among women, compared to men, namely 42.209 persons with disability are male and 52.203 are women (5.6% of female resident population).⁶² Disability in children is noted in 2255 cases with the following disabilities type: Movement - 349 (15.5%), Vision - 428 (19%), Hearing - 89 (3.9%), Communication - 491 (21.8%), Other difficulties - 898 (39.8%)). 63 The Republic of North Macedonia ratified the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) in 2011. In 2023, the Government of North Macedonia adopted the 2023 – 2030 National Strategy for the rights of the persons with disability with 2023 - 2026 action plans. Despite the adopted

⁶¹ SSO (2021) Population Census

⁶³ UNDP's (2023) publication *Policies for Disability-Inclusive Disaster Risk Reduction in the Context of the* Republic of North Macedonia challenges the Census data as 15% of the global population experience some form of disability which would translate to n= around 276,0004 citizens in North Macedonia

Who is most vulnerable to be left behind?



Women with disabilities – face multiple discrimination; inaccessibility of gynaecological institutions (public and private)

People with intellectual disabilities face limited access to inclusive education, unemployment and lack of support **Persons with vision impairment and blindness**- physical inaccessibility and a lack of specialized support, insufficient access to specialized educational resources

legislation, persons with disabilities in North Macedonia in 2023 are still faced with direct and indirect discrimination, social exclusion and barriers.⁶⁴

Discrimination: Stigmatization and discrimination against persons with disabilities prevails, which in combination with the inaccessible environment contributes to limited opportunities for persons with disabilities to participate as equal members of society. Women with disabilities are in particularly vulnerable situation. "Perceptions conducive to multiple discrimination are plentiful and they intersect between gender and disability, especially for women with multiple disabilities. ⁶⁵ Violations of child rights is more common against children with disabilities, compared to other children in the country, making children with disabilities particularly vulnerable to being left behind". ⁶⁶

There are various barriers that prevent persons with disabilities from exercising their full range of rights on an equal footing with others. They face multiple and direct discrimination as buildings, construction environment, transportation, and digital technology are inaccessible. Reasonable accommodation is not provided to the extent needed. Various information needed to exercise and claim rights is not available in different accessible formats. Persons with disabilities are discriminated against in accessing justice since most of the courts are not accessible. Their rights to participate in public and political life, to vote and stand for office, are limited for the same reasons, coupled with underrepresentation in political parties. The most severe restrictions are faced by persons with intellectual and psychosocial disability who are deprived of legal capacity by a court decision, which automatically deprives them of the right to vote. This

⁶⁴ European Commission. (2023) North Macedonia Country Report. Available online: North Macedonia Report 2023 - European Commission (europa.eu)

⁶⁵ United Nations Partnership on the Rights of Persons with Disabilities (UNPRPD). (2022) Situational Analysis of The Rights of Persons with Disabilities in North Macedonia- Country report. Available online: Situational Analysis of the Rights of Persons with Disabilities in the Republic of North Macedonia UNICEF North Macedonia

⁶⁶ According to the EC (2023) *North Macedonia Country Report* in 2022, 252 complaints were filed with the Ombudsman related to breaches of children's rights, 12 of which concern children with disabilities.

barrier is included in the Constitution⁶⁷ and transposed into the Electoral Code (EC).⁶⁸ Namely, the Constitution stipulates that persons deprived of legal capacity do not have the right to vote, while the Law further specifies that persons with revoked legal capacity by a court decision shall be removed from the voting lists.

Geography: In both urban and rural areas, public buildings often do not meet accessibility standards despite legal requirements. Streets, roads, and public spaces are frequently not designed to accommodate the needs of persons with disabilities, affecting their ability to move freely and safely in their environment, access services and exercise rights. Transport is not adjusted to the needs of persons with disabilities, which limits the opportunity for them to live independently.

Shocks and fragility: Physical challenges and dependency on others make persons with disabilities particularly vulnerable during disasters, as they may have difficulties evacuating or accessing emergency services. Historical data shows that persons with disabilities are disproportionately affected by disasters, especially floods, resulting in higher mortality and injury rates due to lack of accessible equipment.⁶⁹ Persons with disabilities have been among the victims in several disaster events, such as the flash floods in Radovish and Konche in 2008, and the floods in Tetovo in 2015 and Skopje in 2016. Disability mainstreaming in DRR policies is at a very rudimentary stage and is not recognized as an area of importance for the lives, well-being and building resilience of persons with disabilities. The existing policy and legislative framework have been assessed as "blind" to the inclusion of disability in disaster risk management.⁷⁰

Governance: The current legal framework⁷¹ does not fully align with the Convention on the Rights of Persons with Disabilities (CRPD). This misalignment creates barriers for persons with disabilities in realizing their human rights.⁷² The State provides different benefits for the same disability type. For example, different laws, including the Law on Civilian Invalids

⁶⁷ Persons deprived of legal capacity have no voting rights - Article 22, para 4 of the Constitution

⁶⁸ Persons whose legal capacity has been revoked by a court decision and cannot express legally relevant will shall be removed from the voters' list - Article 43, para 2, Electoral Code.

https://drive.google.com/file/d/1ZJMruqcNl-yC5VuWSzpfT9BFeKphm5An/view

⁶⁹ According to UNDP (2023) *Policies for Disability-inclusive Disaster Risk Reduction in the Context of the Republic of North Macedonia*, Persons with disabilities have been among the victims in several disaster events, such as the flash floods in Radovish and Konche in 2008, and the floods in Tetovo in 2015 and Skopje in 2016

⁷⁰ UNDP (2023) *Policies for Disability-inclusive Disaster Risk Reduction in the Context of the Republic of North Macedonia*. Available online: <u>Policies for Disability - Inclusive Disaster Risk Reduction in the Context of the Republic of North Macedonia | United Nations Development Programme (undp.org)</u>

⁷¹ Key documents include: Convention on the Rights of Persons with Disabilities (CRPD), Law on Prevention and Protection Against Discrimination, National Strategy for the Rights of Persons with Disabilities 2023-2030, Law on Construction, Rulebook on the Manner of Providing Unobstructed Access, Movement, Stay, and Work of Persons with Disability in Buildings, Electoral Code, Law on Higher Education, Law on Social Protection.

 $^{^{72}}$ UNDP North Macedonia. "Policy for Disability-Inclusive Disaster Risk Reduction in the Context of the Republic of North Macedonia." PDF, April 2023

from the War (1976), Law on the Rights of War Invalids, Members of Their Families and Members of Families of Fallen Fighters (1996) and the Law on Special Rights of Members of the Security Forces and Members of their Families provide benefits for persons with disabilities, not on the basis of the disability, but based on the reason to become disabled. "Stakeholders, OPDs and CSOs, including the persons with disabilities themselves and the parents of children with disabilities do not understand the concept of independent life". The support staff in group homes formed with the process of deinstitutionalization is focused on basic care activities and cultural events from time to time. There is no evidence of planning for persons with disabilities to be included in the community. The necessary support services for independent living have not been developed yet.

Lack of self-confidence contributes to some of the deinstitutionalized persons feeling insecure regarding the relevance and success of the process itself. The lack of accessibility restricts persons with disabilities from participating in the community. Legal capacity continues to be taken away from persons with disabilities. Parallel to this, a large portion of persons with disabilities in institutional care, group homes or families are still deprived of their legal capacity and put under guardianship.

There are no systematic and transparent consultation processes with Organizations of Persons with Disabilities (OPDs) in policy making processes and particularly during budgeting. This lack of involvement means that their unique perspectives and needs are not adequately represented or addressed. Although CSOs representing persons with disability are sometimes consulted, these processes are not regulated and depend on the willingness of the governmental and public institutions whether and which CSOs will be invited in such processes. Moreover, in many cases, participation of CSOs doesn't necessarily mean that their inputs will be taken into consideration. In addition, there is a lack of capacities among persons with disabilities, especially women and youth, in democratic decision-making, policy formulation, and legislative processes, which hinders their ability to participate meaningfully in governance. 73 The quota system intended for equal gender representation, which is envisaged in the legislation, does not incorporate the issue of participation of women and girls with disabilities. The State Election Commission (SEC) has undertaken positive initiatives to enhance the inclusion and participation of persons with disabilities, including making information more accessible for persons with disabilities and improving physical election-day accessibility.⁷⁴ Due to this situation, persons with disabilities are significantly underrepresented in political structures at both national and local levels.

Persons with disabilities and their organizations are insufficiently involved in the policy-making process in almost all areas, both nationally and locally in North Macedonia. This situation results both from the inadequate policy, regulatory and institutional frameworks, as well as from the "invisibility" of persons with disabilities and the

 74 OSCE- ODIHR. The Electoral Participation of Persons with Disabilities and the Election Administration in North Macedonia – Activity Brief.

⁷³ OSCE. "Election Participation of Persons with Disabilities in North Macedonia." PDF, 2023.

dominant narrative that they are considered within the wider group of vulnerable population.⁷⁵

Socio-economic status

Less than 5% of children with disabilities are enrolled in some form of pre-school education.⁷⁶ Early childhood development centers cannot always meet the prerequisites and ease the access and care for children with developmental disabilities, while the awareness of their benefits is still at a very low.⁷⁷ Education is more inclusive since the introduction of the personal assistants, but their obligations and responsibilities towards the students and other professionals is not clear. The largest percentage of teachers (59.9%) equate the work tasks of the personal assistant with the work tasks of the education assistant.⁷⁸

The Law on Secondary Education, the Law on Higher Education as well the 2018-2025 National Education Strategy lack comprehensive and inclusive approach and all of them are not in line with the CRPD. This results in insignificant enrolment of persons with disabilities in higher education. In 67 faculties in North Macedonia, only 0.21% of the students in the first cycle of studies are with disabilities.⁷⁹ Physical and communication accessibility, as well as access to assistive technology is a major problem for persons and especially for children with disabilities in education. Another challenge, especially for children and young persons with disabilities is the lack of comprehensive sexual education within the formal school curricula, which make them more vulnerable to violence, including gender-based violence, sexual harassment, etc.⁸⁰

The level of registration of unemployed persons with disabilities is very low compared to persons without disabilities. One of the key reasons for this situation is that in order to be registered as unemployed, every person is obliged to appear in person at the premises of the Employment Service Agency of Republic of North Macedonia (ESA), which are inaccessible. Persons living in institutions, group homes and other organized forms of supported living, as well as adults with disabilities who attend day-care centers, are not registered in the ESA.

There are a number of incentives to support the employability of persons with disabilities: the Special Disability Fund that supports the sheltered private companies; services for vocational rehabilitation and inclusion in the labor market for persons with

⁷⁵ UNDP North Macedonia. "Policy for Disability-Inclusive Disaster Risk Reduction in the Context of the Republic of North Macedonia." PDF, April 2023

⁷⁶ UNICEF, 2016 - https://www.unicef.org/northmacedonia/early-childhood-education

⁷⁷ Karovska Ristovska A. et al. Situation Analysis on Early Childhood Intervention in North Macedonia. United Nations Children's Fund (UNICEF), Country Office Skopje. 2023

 $^{^{78}}$ UNPRPD (2022) Situational analysis of the rights of persons with disabilities in North Macedonia

⁷⁹ Lazarev K. Analysis: Access to higher education for persons with disabilities in North Macedonia. Westminster Foundation for Democracy in North Macedonia. 2023

⁸⁰ UNPRPD. Situational analysis of the rights of persons with disabilities in North Macedonia. 2022

disabilities; support for self-employment;⁸¹ financial support for companies for employment of person with disability, support for purchasing special equipment, and support for remuneration of work assistant for the person with disability.⁸²

Access to health services is based on the medical model of disability. Communication in health care facilities remains a major problem for persons who are deaf and others who rely on sign language because health personnel are not well versed with sign language".⁸³ Access to orthopaedic devices and equipment is quite limited, determined by age, amount of co-payment, expiration date of the devices, and for some devices the status of whether a person is un/employed is important".⁸⁴ The Program for active health care of mothers and children in 2024⁸⁵ is a step forward to prevention of diseases and the severe outcomes. However, follow-up will be needed to provide other screenings for all newborns, like screening for metabolic diseases, screening for hearing impairments, screening for vision impairments and other devices. An additional barrier to accessing the health services is the inaccessibility of both public and private health facilities and institutions, including the inaccessibility of gynaecological institutions (public and private). This problem is especially prominent for primary health care offices with general practitioners, gynaecologists and dentists, since accessibility standards were not set in the criteria for opening these offices.

Why are they left behind?

No systematic approach toward effective implementation of the CRPD

The existing legal framework, including the Constitution, governing civil and political rights, as well as practices in the fulfilment and protection of economic, social and cultural rights, is rigid, restrictive and discriminatory, and not aligned with UN CRPD.⁸⁶

Cases of disability discrimination are rarely reported

There is a lack of understanding and information within the disability community regarding the system and remedies for protection of rights.⁸⁷ These results in persons with disabilities largely underreporting cases of discrimination to the relevant duty

 $^{^{81}}$ In 2023, a total of 1,501 persons received non-refundable financial support, out of which 19 were persons with disabilities that is only 1.2% from the total number of persons benefiting from this measure.

⁸² In 2023, financial support for employment of 130 persons with disabilities was provided.

 $^{^{83}}$ UNPRPD. Situational Analysis of the Rights of Persons with Disabilities in North Macedonia. 2022 84 Ibid

⁸⁵ Government of the Republic of North Macedonia. Program for active health care of mothers and children in North Macedonia in 2024. Official Gazette no. 13/2024 from 22.01.2024

⁸⁶ UNPRPD (2022). Situational Analysis of The Rights of Persons with Disabilities in North Macedonia-Country report.

⁸⁷ Ibid

bearers as they tend to approach local and/or national OPDs, rights-based CSOs and umbrella organizations.

Relevant laws do not adequately ensure equal access to transport for persons with disabilities

Benefits are often limited and membership in specific organizations is required, thus excluding and leaving many persons out. The public transport systems do not meet minimum accessibility standards, making it challenging for persons with disabilities to use these services independently.

Persons with disabilities face challenges in access to information

The Law on Free Access to Public Information does not mandate that public information be available in accessible formats, which limits the ability of persons with disabilities to access essential information. There is insufficient provision for sign language interpretation, with only a small number of trained interpreters available. Additionally, the use of Braille is not well regulated or promoted within the country, further marginalizing visually impaired persons.⁸⁸ What is more, disaster-related information and early warning systems are often not provided in accessible formats for persons with disabilities, such as sign language, Braille, or simplified language. This lack of accessible communication can prevent them from receiving timely warnings and crucial information during emergencies.

DRR policies blind to inclusion of disability

Moreover, there is insufficient coordination among institutions to build resilience for persons with disabilities. Many governmental institutions lack focal points for disability coordination, and key decision-makers often lack awareness and understanding of disability inclusion in disaster contexts. This results in the exclusion of persons with disabilities which extends to all phases of disaster management — prevention, preparedness, response, and recovery, thus resulting in policies and measures that do not fully address their needs.

No data collection system

It is difficult to improve the situation experienced by persons with disabilities due to a lack of systematically collected disaggregated and uniformly shared data on persons with disabilities, which hampers the ability to understand and address their specific risks and needs in disaster scenarios. The existing mechanisms for monitoring services are oriented towards collecting current process data and not towards the outcomes and

48

⁸⁸ Ibid

quality of the provided services. There is a lack of assessment of the needs in the field for children/persons with disabilities. There is a lack of trained staff, lack of network and accessible infrastructure and lack of properly defined quality standards for disability. In spite of the legal obligation for keeping records of children with disabilities, neither health institutions, nor the Institute of Public Health keep registers of children with disabilities.

Lack of an enabling environment for political participation of persons with disabilities

Difficulties in electoral participation are particularly pronounced for women and persons with disabilities from non-majority ethnic groups. The exercise of the right to vote by the community with disabilities, where voting takes place at home, is medically based.⁸⁹ Moreover, challenges around accessibility to political parties and their internal structures compromise the ability of persons with disabilities to run for office, make informed electoral choices, associate, and take part in political life.

Insufficient specialized health services, and programs for prevention, early detection, diagnosis, early intervention and rehabilitation

The age of children first enrolled in Early Childhood Intervention - ECI services shows that there is a late identification of children with developmental delays/disabilities in North Macedonia. Regarding referral, the parents are usually the ones that seek out services.⁹⁰

What can be done?

Policy and legal framework

- The legal framework, policies and practices should ensure the application of a human rights approach to disability.
- Ensure meaningful participation of persons with disabilities in all decision making that impacts them, whether it is legal/policy reform, accessibility and transport, education curricula or anything else.
- Advance the role and functioning of the NHRI's (Ombudsman's) National Monitoring Framework for CRPD.
- Enforce strict accessibility standards by specifically implementing inclusive education policies; enhancing employment support; and strengthening social services.

⁸⁹ OSCE- ODIHR. The Electoral Participation of Persons with Disabilities and the Election Administration in North Macedonia – Activity Brief.

⁹⁰ Karovska Ristovska A. et al. Situation Analysis on Early Childhood Intervention in North Macedonia. United Nations Children's Fund (UNICEF), Country Office Skopje. 2023

• Increase accountability for instances of disability discrimination.

Institutional capacities and governance

- Enforce accessibility standards in all public infrastructure, including buildings, transport, and community spaces, with a focus on inclusive design and targeted improvements in rural areas to ensure safe, independent mobility for people with disabilities.
- Strengthen capacity of all institutions for implementation of the 2023-2030
 National Strategy for the Rights of Persons with Disabilities; enhance the
 capacities of the National Statistical Office, government institutions and NHRI in
 systematic and disaggregated collection and analysis of disability related data by
 government institutions.
- Ensure disaggregated data that will provide proper insight in the status on persons with disabilities in different sectors, including preschool education, education, employment, health care, social protection and other relevant sectors
- Improve inter-institutional coordination and cooperation.

Education and awareness

- Strengthen knowledge and awareness of right holders and duty bearers.
- Launch campaigns to increase public understanding of disability issues, reduce stigma, negative stereotypes and promote inclusivity.
- Encourage the media and public figures to represent persons with disabilities positively and accurately.

Migrants, refugees, asylum seekers, persons under subsidiary protection, persons granted temporary protection, stateless persons

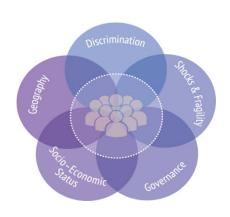
Migrant stock data for North Macedonia is available only from national population censuses. According to the 2021 census, 91 there was a total of 57.404 migrants living in the country, while the European Union Atlas of Migration detects an increased immigration rate amounting to 694.000 persons of which (38% are settled in EU) and 7.065 refugees within the territory in 2022. 92 According to the Ministry of Interior, until 16.08.2024, there were 187 asylum applications submitted. Most of them are from Syria

⁹¹ SSO (2023) Population census 2021, Skopje. Available online POPIS DZS web EN.pdf (stat.gov.mk)

⁹² Blasco, A., Icardi, R., Kajander, N., Krawczyk, M., Loeschner, J., Scapolo, F., Seiger, F., Sermi, F. and Tarchi, D., Atlas of Migration - 2023, Bongiardo, D., Crespi, I. and Sofos, I. editor(s), Publications Office of the European Union, Luxembourg, 2023. Available online: IRC Publications Repository - Atlas of Migration - 2023 (europa.eu)

(n=50), Morocco (n=39), Democratic Republic of Congo (n=20) Algeria (n=13) and Pakistan (n=9). Sources in the Ministry of Social Policy, Demography and Youth report around 100 stateless persons living in the country.

Article (4a) of the Law on Civil Registry mandates that every child, regardless of the parents' status, must be registered immediately at birth. According to the Registry Office data as of June 2024, there were 342 children in need of assigned name in 2024 and therefore at risk of statelessness. 62 of these children have had their civil registration resolved in the meantime. With the systemic collection of data on newborns, North Macedonia is entering a new phase of systematic registration of children, prevention and eradication of the risk of statelessness.



Who is most vulnerable to be left behind? **Young stateless persons** – cannot exercise the right to education

Working age asylum seekers – cannot access the labour market

Persons granted temporary protection – do not have effective access to rights

Unaccompanied children – cannot access health services, no age assessment and education placement

Stateless women and children – most vulnerable to crises and shocks

Discrimination: Asylum seekers⁹³ are discriminated against to a largest extent. Discrimination is intersecting several factors such as race, ethnicity, age and gender. This results in social exclusion and inability to exercise basic universal human rights such as the right to identity, education, health and other economic, social, cultural, civil and political rights. "While attendance in education is possible with a decision of the Ministry of Social policy, Demography and Youth, the issuance of educational certificates for young stateless and asylum seekers is not possible due to the lack of Personal Identification Number (PIN) based on which the Ministry of education can register the person into the system and issue a certificate". ⁹⁴ This might have long-term effect on the social inclusion of these persons. Further, working age asylum seekers are discriminated against as they

51

⁹³ Asylum seeker is a foreigner that seeks international protection from the Republic of North Macedonia, who has expressed intention or submitted an asylum application, in respect of which a final decision has not been taken in the procedure for recognition of the right to asylum.

⁹⁴ Focus group discussion on migrants, asylum seekers and stateless persons, 23 August, 2024, Skopje.

cannot work, get a PIN, or open a bank account, which runs counter against international human rights law. This group receives superficial treatment, leaving them with little choices to integrate or to leave the country. 95 The wellbeing of the migrants, refugees and asylum seekers depends on the possession of PIN, that conditions effective access to services. In the first six months of 2024, 3.105 migrants and refugees transited North Macedonia. Majority of them, or 60% were from Syria, 7% from Morocco, and 4% from Egypt, Afghanistan and DR Congo. Less than 1% apply for asylum. These mixed migrants generally do not stay longer than a day or two in the Temporary Reception Centers where they receive hygiene packages, food and medicines. Based on a Government decision from 2015, all irregular migrants have access to health care. At the Reception Center for Foreigners, 120 children were detained, including 51 unaccompanied children to ensure their witness statements in court cases against smugglers in 2023.96 Unaccompanied children are often channelled through the asylum procedure in order to get protection, predominantly complementary, subsidiary protection. Owing to the limitation in the provisions of the Law on International and Temporary Protection, family reunification is delayed for two years for persons granted subsidiary protection, although this right needs to be realized immediately.97

Geography: is a risk factor due to the precarious routes that migrants and refugees are forced to take, facing many uncertainties. Asylum seekers are usually placed in the reception centre in Vizbegovo. The center is located in an isolated place, far from the city of Skopje, with only one connecting bus line, for which asylum seekers are provided with free bus tickets and are allowed to exit the centre. However, they are being continuously discriminated and rarely exercise their internationally - foreseen rights due to not having legal basis to work in the country. *Being confined in a remote place has negative impact on their mental health and increases their need for psycho-social support which is scarce.* 98

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⁹⁵ Focus group discussion on migrants, asylum seekers and stateless persons, 23 August, 2024, Skopje.

⁹⁶ MYLA (2023) Report on immigration detention in North Macedonia, available online: https://myla.org.mk/wp-content/uploads/2024/07/Detention-ENG-2023.pdf

 $^{^{97}}$ EUAA/EVAL/2022/12/FR; Final External evaluation of the EUAA's Roadmap for cooperation with North Macedonia Ex post evaluation report

⁹⁸ Focus group discussion on migrants, asylum seekers and stateless persons, 23 August 2024, Skopje.

Socio-economic status: Persons granted international protection, both recognized refugees 99 and persons under subsidiary protection, 100 can formally access the labor market and generate income. On the other hand, asylum seekers and stateless persons cannot formally be included in the labour market, because the corresponding legislation does not foresee assigning PIN to these people, and therefore they face financial difficulties and are socially excluded. "Informally they can work, they are well connected between themselves, and informed on what they can, should and should not do". 101 Access to primary education is provided in the primary school on ad-hoc basis in Vizbegovo in Macedonian language, where asylum seekers are accommodated and supported through projects in the absence of systematic solutions. If asylum seekers receive a positive decision on their asylum application and are granted international protection, their socio-economic status improves, but the procedure of approval takes long (beyond six months). On the other hand, the approval of the asylum application also allows access to integration program which can improve socio economic conditions, but the approvals are rarely given. "This year, we had 145 applications for obtaining international protection and 6 were approved; these were the first approved ones since 2016¹⁰². 627 of 786 known persons at risk of statelessness acquired their first ID card in North Macedonia. At the moment of this writing, 159 persons remain without documents, which restricts them of getting jobs or accessing the health and social protection system. Some persons are lacking birth and civil registration; and some are persons with undetermined nationality due to the dissolution of Former Yugoslavia. They can obtain a passport for foreigners and travel, but without identification documents they cannot work which puts them in dire position. "Most of them are Roma by ethnic background and are active in the informal economy.¹⁰³

Another refugee group present in the country are 179 Kosovo refugees who have lived in protracted refugee conditions since 1999. The trend of cessation of international protection for Kosovo refugees, continued and resolution of their status by granting Permanent Residence in line with the Amendments to the Law on Foreigners (of December 2023) is still pending.

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⁹⁹ Person with a refugee status is a foreigner who, upon the examination of his/her application, was granted refugee status and that is found to meet the conditions set forth in the Geneva Convention, i.e. a person who, owning to well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable or, owing to such fear, unwilling to avail himself of the protection of that country, or who, not having a nationality and being outside the country of his former habitual residence, is unable or, owing to such fear, is unwilling to return to it.

¹⁰⁰Persons under subsidiary protection is a foreigner that does not qualify as a refugee, but to whom the Republic of North Macedonia will grant the right to asylum and allow to remain within its territory, because there are reasons to believe that if they return to their country of nationality or, in the case of a stateless person, they would face a real risk of suffering serious harm in their country of former habitual residence.

 $^{^{101}\}mbox{Focus}$ group discussion on migrants, asylum seekers and stateless persons, 23 August 2024, Skopje. $^{102}\mbox{Ibid}$

¹⁰³Ibid

North Macedonia activated Temporary Protection¹⁰⁴ in August 2023, offering over 500 refugees from Ukraine security and protection. The Government needs to amend the relevant laws to ensure effective access to rights and services in line with the Law on International and Temporary Protection.¹⁰⁵

Shocks and crises: The refugees and asylum seekers are fleeing from war and conflicts and have often suffered traumatic events. Some demonstrate resilience, others are very fragile and need mental health support. The facilities they are housed in are secure in terms of natural disasters and have protocols employed for emergencies, but drills are not regularly organized. Stateless women and children, mainly of Roma ethnicity, are in the most vulnerable situation. The dwellings they live in are substandard and improvised, vulnerable to fires and floods. Prevention and preparedness measures are not implemented.

Governance: The voices of the migrants, refugees, asylum seekers and stateless persons are rarely heard directly. They are regularly visited by international organizations, jointly with the authorities and civil society organizations that represent and advocate for their rights. These organizations also provide services such as free legal aid, psycho-social support and other services within the facilities where they are housed. The CSOs are also doing regular assessments of the needs, gap analysis of the system and propose changes and improvements. This support is project-based, and financing of services provided by CSOs for these target groups is not systematically regulated and financed by the state.

Why they are left behind?

Incomplete legal framework not aligned to international human rights standards

Implementation challenges due to the lack of legislative harmonization with the Law on International and Temporary Protection and the Law on Foreigners hinder effective access to rights for the forcibly displaced from Ukrainian conflict, creating significant barriers to their inclusion and self-reliance in the country.

Lack of alignment with the EU directives on migrants and asylum seekers

 ¹⁰⁴ In the event of mass influx of persons arriving directly from a country where their lives safety or freedom have been endangered by war, civil war, occupation, internal conflict characterized by violence or mass violations of human rights, the Government may grant them temporary protection.
 105 On July 30, 2024, the Government approved a decision to extend temporary protection for Ukrainians until August 9, 2025, following the previous decision adopted on August 8, 2024. Implementation of the temporary protection is conditioned on the adoption of amendments to relevant laws, which has not yet been initiated.

The Qualification Directive¹⁰⁶ mandates Member States to provide immediate labour market access for those with international protection. For asylum applicants specifically, the Reception Conditions Directive (RCD)¹⁰⁷ requires Member States to permit asylum applicants to access the labour market no later than nine months after their application, although it is not unfettered access, as some restrictions are allowed.¹⁰⁸ The Racial Equality Directive¹⁰⁹ emphasizes the right to equal treatment regarding working conditions, thereby contributing to fostering a non-discriminatory work environment. The North Macedonian legislation needs to be approximated with these directives for their progress in the EU membership accession.

Lack of effective integration policy

Successful integration of migrants, refugees, persons under subsidiary protection, temporary protection, and asylum seekers is based on equitable access to opportunities and resources, participation in the community and society, and feelings of security and belonging in their new homes. 110 Focus group discussion with asylum seekers clearly demonstrated that despite providing housing, hygiene and food as well as finding ad-hoc solutions for children's primary education, the right to health, inclusion in the labour market and developing social links and bonds program is not available asylum seekers. "There is willingness to learn the Macedonian language, but this has." 111 Social protection support is available only after the international protection is obtained, as well as the right to independent living, employment and integration. At present, there is no specific legislation regulating integration for any of these categories.

Lack of implementation of the Guidance on reception conditions for unaccompanied children

The European Union Agency for Asylum translated and disseminated its Guidance on reception conditions for unaccompanied children, but did not support its implementation in North Macedonia. This Guidance is important as the activities that were foreseen in relation to addressing health needs of asylum applicants and operationalizing needs assessment procedures was not done. This is also problematic, as the European Union Agency for Asylum does not have a clear mandate to provide support on the development

¹⁰⁷ EC, Reception Conditions Directive, Availableonline: https://home-affairs.ec.europa.eu/policies/migration-and-asylum/common-european-asylum-system/reception-conditions_en

¹⁰⁶ L 2011337EN.01000901.xml (europa.eu)

¹⁰⁸ ECRE (2024) Policy paper: The right to work for asylum applicants in the EU. Available online: <u>ECRE-Policy-Paper-12 The-Right-to-Work-for-Asylum-Applicants-in-the-EU.pdf</u>

¹⁰⁹ EC (2000/43/EC) The Racial Equality Directive. Available online: <u>Directive - 2000/43 - EN - EUR-Lex (europa.eu)</u>

¹¹⁰ Ager & Strang, 2008; Hynie, Korn, & Tao, 2016; Phillimore & Goodson, 2008; Smith, 2008.

¹¹¹ Focus group discussion on migrants, asylum seekers and stateless persons, 23 August, 2024, Skopje

of a protocol on reception with a specific focus on health issues to tackle reception and accommodation issues.¹¹² This puts children who need state provision health protection and education in a more vulnerable situation and is in collision with the principle of 'the best interest of the child'.

Implementation challenges caused by the lack of legislative harmonization hinder effective access to rights for the forcibly displaced from Ukrainian conflict, creating significant barrier to their inclusion and self-reliance in North Macedonia.

What can be done?

Stigmatization and prejudice are the root causes of marginalization of migrants, refugees, asylum seekers and stateless persons, which should be tackled through education. Also, inadequate legal and policy frameworks help to entrench discrimination and relative impunity for hate speech against this group. Solidarity and empathy must be developed from early ages. The gaps detected with the qualitative research and analysis also provide basis for the following recommendations:

Policy and legal framework

- To ensure full implementation of the Decision for Temporary Protection for forcibly displaced from Ukrainian conflict, through their inclusion and selfreliance, harmonization and amendments are needed to the Law on Social Protection, Health Insurance, Employment and Work on Foreigners, Personal Identification Number, and corresponding Rulebooks.
- Support the Government to establish integration framework for persons granted international protection by adopting Law or Strategy on Integration, as appropriate.
- Approximate Macedonian asylum-related legislation with Qualification Directive, the Reception Conditions Directive (RCD)¹¹³ and the Racial Equality Directive¹¹⁴ in terms of labour market participation and the EU acquis on asylum in terms of family reunification of unaccompanied minors.
- Develop an integration policy and implement emersion programs that ensure full realization of all human rights of these population groups.

 $^{^{112}\,}EUAA/EVAL/2022/12/FR;$ Final External evaluation of the EUAA's Roadmap for cooperation with North Macedonia Ex-post evaluation report

¹¹³ EC, Reception Conditions Directive, Available online: https://home-affairs.ec.europa.eu/policies/migration-and-asylum/common-european-asylum-system/reception-conditions-en

¹¹⁴ EC (2000/43/EC) The Racial Equality Directive. Available online: <u>Directive - 2000/43 - EN - EUR-Lex (europa.eu)</u>

- Abolish the placement of unaccompanied children in reception centres and abolish the practice of detaining asylum-seeking children who are identified as witnesses in the process of criminal cases against smugglers.
- Resolve legal status of all known persons at risk of statelessness.
- Establish Statelessness Determination Procedure for persons in migratory context within the Law on Foreigners starting from 2025.

Institutional capacities and governance

- Exercise family reunification procedure for people under subsidiary protection within a reasonable timeframe, to start early in the asylum procedure, latest immediately upon the decision of granting the protection.
- Develop SOPs protocols on reception with a specific focus on health issues, knowledge assessment and education of staff.
- Ensure adequate staffing to implement rights-compliant age assessment procedure.
- Ensure adaptations of space for persons with disabilities in all reception Centers.

Education and awareness

- Strengthen capacity and human resources for implementation of compliant age assessment procedure.
- Awareness raising campaigns to decrease stigmatization and promote integration of these groups.

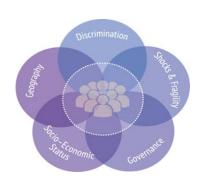
Persons deprived of liberty

The Council of Europe Annual Penal Statistics Report includes that in North Macedonia there are twenty-six (n=26) persons held in custodial institutions/units for juvenile offenders and 2606 prisoners held in prisons. The report observes that the country has very high prison population rate per 100,000 habitants (48 PA%); very high prison population rate of inmates aged 50 or over in the prison population (42 PA%); and very high ratio of inmates per one staff member (47 PA%) as well as high prison density per 100 places (45 PA%).¹¹⁵ The latest TMEE Data Collection shows decrease in number of children (0-17 years) in detention at the end of the year (per 100,000), in 2022, only 5 children were accounted and in pre-sentence detention there were 2, an increase from 1 in 2020. There is also a decrease in the use of mediation and alternative measures for

¹¹⁵ Aebi, M. F. & Cocco, E. (2024). SPACE I - 2023 – Council of Europe Annual Penal Statistics: Prison populations. Council of Europe.

children in conflict with the law. In 2022, there were 4, decreased from 25 in 2021, while institutional measures were given to 18, and 4 children were sentenced to prison in 2022.

Who is most vulnerable to be left behind?



Incarcerated or detained persons with disabilities – prisons do not have appropriate conditions for people with disability

Incarcerated or detained women – have no option to be transferred in another prison (only Idrizovo) and mostly suffer from poor hygienic conditions

Children in correctional facilities – particularly vulnerable as they miss education, experience discrimination and are at risk of recidivism. Roma children are overrepresented.

Returnees from Daesh in Syria – cannot obtain ID cards and cannot exercise health, education, social protection rights

Discrimination: The UPR noted overcrowding and substandard conditions in some wards, including lack of access to potable water and sanitation, as persistent problems that affect persons in prisons and detention centers. Access to health care, including mental health care, dental treatment and drug use disorder treatment is limited. *The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment has repeatedly criticized the very poor conditions of detention and imprisonment.* ¹¹⁶

There is a lack of prison guards and staff who do not have sensitivity for the person needs, identities and status of the prisoners and their rights. Discrimination, although prohibited by the Law on Execution of Sanctions¹¹⁷ is observed for keeping prisoners with physical

¹¹⁶ COE(2023) Report to the Government of North Macedonia on the visit to North Macedonia carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), available online: https://www.coe.int/en/web/portal/-/anti-torture-committee-report-on-north-macedonia

¹¹⁷ Law on Execution of Sanctions, Official Gazette no. 99/2019 in art.4; p.(2) regulates that "discrimination on the grounds of race, color, ancestry, national or ethnic origin, gender, sex, sexual orientation, gender identity, member of a marginalized group, language, citizenship, social origin, education, religion or religious belief, political belief, other belief, disability, age, family or marital status, property status, health status, personal property or social status, or on any other ground shall be prohibited for persons who are imposed sanctions".

disabilities and this makes them discriminated against by the other population. With regard to physical disability, the prisons do not even follow the decisions of the Commission for the Prevention and Protection against Discrimination. Women are also discriminated as their transfer in other prisons in the country is not regulated. Even though some changes have been made, the effective implementation of this opportunity is missing.

Women sentenced to imprisonment from all over the state serve their sentences in the KPU Idrizovo, as the only penitentiary institution in the state where there is a separate department for women. Poor and unhygienic conditions especially affect women. Instances of ill-treatment and excessive use of force by the prison guards and police are repeatedly reported. Finally, women returnees from Syria and Iraq, unlike the men, were not imprisoned as per the Art. 322a from the Criminal Code.

In the most vulnerable situation are children in correctional facilities who are missing on education, are discriminated against and run the risk of recidivism, which affects the future life quality and prospects. Current legislative amendments to address educational access for children in correctional homes remain not adopted, hindering their access to formal education. This goes against the opinion of the Commission for Prevention and Protection from Discrimination¹¹⁸ and the EU country reports that include a recurring recommendation¹¹⁹ to ensure systemic education for the children in the educational correctional facility.

Geography: Geography per se is not a risk factor as the prisoners are usually placed in prisons in accordance with the security assessment, and in proximity to the location of the person's residence. When this is not the case, the right of the prisoner to contact and receive visits from the family is restricted. A person who lives in a smaller city, cannot comply with a probation sentence to visit a psychiatrist, since not all cities have psychologists and psychiatrists, leaving the person without adequate care.

Socio-economic status: In order to realize the right to health in prison, persons deprived of liberty need identity cards and health insurance cards. Issuance of these cards are

"Currently in Idrizovo there are 50 sick people and only one doctor."

problematic for some prisoners, i.e. returnees from Daesh in Syria that serve sentence for participation in a foreign army/conflict. CSOs working with persons deprived from liberty also report insufficient access to adequate health care, including

mental health care, dental treatment and drug use disorder treatment due to the lack of medication, lack of staff, or wrong diagnosis or even ill treatment. Also, prescribed medicine

 $^{^{118}}$ An <u>opinion was adopted</u> on the 23.03.2023 which finds that there is direct continuous discrimination of the children in the Educational correctional facility due to the lack of access to education.

¹¹⁹ EC (2022) North Macedonia Country Report, Brussels. Available on line: North Macedonia Report 2022 - European Commission (europa.eu)

for gynaecological treatment have allegedly not been applied to women in prison. The nonopiate addicts are treated as opiate addicts, which suggests maltreatment. Health protection is most problematic, as there is a shortage of staff and not all prisoners or detainees have health insurance.

To ensure that persons deprived of liberty are able to integrate in the society after they are released, they need to possess ID cards at least 9 months before being released, and according to an assessment to be provided access to programs for work adaptation and/or training. However, *prisoners and detainees do not have information on how they can obtain ID documents and claim their rights*. Vocational training was recently provided but the solution was project-based and not systematic. As a result, all prisoners face financial challenges which impact their well-being and ability to live with dignity, considering their weak purchasing power to obtain the required food, hygienic packages, and adequate conditions in the cell. Persons deprived of liberty have right to work outside the prison for which they can be paid, but for male prisoners this is problematic as companies ask for non-conviction certificate in contravention of the Labour Law.

Finally, persons deprived of liberty do not receive any counselling or support for life adaptation after they are released. After a long period of imprisonment, many of them are faced with changed society, changed family structures (many

"Many on purpose get involved in crimes to return to the prison as they are homeless".

divorces, loss of family member, loss of parents, or partner) and experience housing problems. This is especially problematic for women who do not have ownership of housing or land and assets like the men. After they are released, returnees from Daesh cannot open a bank account as they are qualified as terrorists and are pushed to work informally, staying in the gray.

Shocks and fragility: The economic crises have had its effect on the functioning of the penal system and indirectly on the wellbeing of the persons deprived of liberty. Investments in the improvement of the facilities for prisoners and detainees have been halted (project-based). "The inflation of prices has negative impact on the plan to build new prisons, or renovation and remodelling of the existing ones for which the Directorate for sanctions has requested additional funds from the Government. After being released from prison, the beneficiaries have the right to one-off cash transfer, but the payments take months while the prices of basic products are soaring, leaving the target group in very dire financial situation and at risk of continuing to commit crimes. As a result of all these factors, a majority of the prison population are not first-offenders but recidivists.

¹²⁰ Interview, Directorate for sanctions, 29 Augus, 2024

When it comes to natural disasters, there are specific regulations on the procedures for fire, earthquake and flood. However, prevention and preparedness measures are not taken regularly with the prison population, leaving them to be more vulnerable.

Governance: The voices of persons deprived of liberty are rarely heard directly, and if so, this is through in-person visits by representatives of international organizations and missions working on the protection of human rights of this population. Their needs and interests are indirectly represented by the civil society organizations that provide services to the persons deprived of liberty, who are also advocating for policy changes. One of the biggest weaknesses of the system identified is the lack of inter-institutional coordination and underfunding that negatively affect the realization of their rights (for example, long time to receive methadone treatment).

Why they are left behind?

No adequate space and conditions for execution of sanctions

The material conditions of detention in all penitentiary and pre-trial detention facilities are not in line with the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules). The Idrizovo and Kumanovo prison facilities are overcrowded. The project for reconstruction of the penal and juvenile justice system facilities with a view to improve the conditions is not implemented in the planned dynamic. This results in sometimes unhuman conditions in sentence execution and wellbeing and security problems for both the persons deprived of liberty and the prison police. Overcrowding and poor and unhygienic conditions in particular affect the women. 121

Operationalization of the Rulebook on the Distribution, Classification and Placement of Convicted Persons in Penal Institutions is missing

Changes of this Rulebook were adopted¹²² to allow women serving a prison sentence to enjoy the same rights and benefits as men, but transfers of women to other prisons are missing. The action plan with activities and sources of budgeting for the adaptation, reconstruction or construction of semi-open and open-type institutions for women convicts is neither adopted, or implemented.

 122 Rulebook amending the Rulebook on the Distribution, Classification and Placement of Convicted Persons in Penal Institutions, Official Gazette of Republic of North Macedonia no. $120/23\,$

¹²¹ UN (2024) Compilation of information prepared by the Office of the United Nations High Commissioner for Human Rights, Forty-sixth session of the Working Group on the Universal Periodic Review in the Human Rights Council

Weak rehabilitation and reintegration programmes

All educational activities are now not available, especially for children in correction homes; restricted recreational and social activities are ongoing and some employment activities; which are not enough, are not systematically organized and available for all prisoners at risk. What's more, the Committee Against Torture depicts that "efforts to provide systematic and personized deradicalization programmes have been provided for prisoners convicted for terrorism abroad but such are not available for those convicted of domestic terrorism offences". 123 The absence of an effective program results in the penal system to be overpopulated with returning offenders.

Prevention mechanism is insufficiently staffed, financed and prioritized

To work effectively, except for police, engagement of medical professionals, social workers and other relevant experts is needed in the penal system, especially those providing mental health services such as psychologist and psychiatrists. The availability of this staff is scarce, and they are overburdened, vulnerable to burn-out. This results in inadequate health care, including mental health care, dental treatment and drug use disorder treatment. Activities for prevention and preparation in case of emergency are not done with the prisoners, making them particularly vulnerable to shocks.

What can be done?

The social, economic and political exclusion which is a result of serious forms of discrimination and deprivation of these group is manifested through lack of access to adequate health care, including mental health care, dental treatment and drug use disorder treatment. The instances of ill-treatment, solitary confinement and excessive use of force must be tackled in parallel to addressing understaffing and overall lack of funding for the prison system. Stigmatization and unacceptance by society adds to their vulnerable situation.

Policy and legislative framework

 Continue the work on increasing prison capacity through new, or construction and remodelling of existing facilities in line with international standards.¹²⁴

¹²³ Committee Against Torture Recommendation CAT/C/MKD/CO/4 (CAT 2024)

¹²⁴ According to the Committee Against Torture Recommendation <u>CAT/C/MKD/CO/4 (CAT 2024)</u> alignment is needed with the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules); the United Nations Standard Minimum Rules for Non-custodial Measures (the Tokyo Rules) and the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules) as per the Committee Against Torture Recommendations

- Enhance the application of non-custodial measures and strengthen the probation system to decrease the number of persons imprisoned in the prison and detention facilities.
- Adopt legislative amendments to ensure access to education for children in correctional homes.

Institutional capacities and governance

- Strengthen and implement educational and work opportunities.
- Develop and implement an effective rehabilitation and resocialization programs.
- Ensure accessibility for persons with disability in the buildings, transport, and information and reintegration programs.
- Advance consultations with civil society and persons deprived of liberty as right holders.
- Change the active employment measures operational plan and budget and provide combination of vocational training and licensing if needed, coupled with psychosocial support (explore opportunity for application of the social mentorship model).
- Stop the practice of solitary confinement and investigate cases of the use of physical force against detained children by security staff.
- Regularly monitor and inspect the educational correctional facilities in Tetovo and Ohrid prisons to ensure the protection of detained children and the provision of the necessary services to them.
- Provide for long term financial and human resources, including qualified personnel to deliver adequate health care, including mental health care, dental treatment and drug use disorder treatment in all types of places of deprivation of liberty, including social and other closed-type institutions, in accordance with the requirements of the Optional Protocol to the Convention.¹²⁵

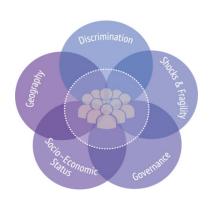
Education and awareness

- Provide training and awareness raising to companies not to seek conviction certificate and ease reintegration prospects of convicts after their release.
- Implement a public campaign to destignatize the work of doctors and other medical staff with persons deprived of liberty in prisons.
- Implement apprentice's programs for young doctors, psychologists and psychiatrists in the penitentiary system.

¹²⁵ Committee Against Torture Recommendation CAT/C/MKD/CO/4 (CAT 2024)

Persons in rural areas

According to the 2021 census data, rural areas in North Macedonia cover approximately 70% of the country's territory, 126 yet they are home to only 38.4% of the population. This is a significant decline from 1960, when 65.98% of the population lived in rural areas, indicating a trend towards urbanization over the decades. Rural communities are characterized by high rates of poverty, with 24.2% living below the poverty line as of 2017, considering that agriculture remains the dominant economic activity. Many households that reliant solely on agriculture, tend to experience higher poverty rates. Persons living in rural areas have limited opportunities to participate in public and political life.



Who is most vulnerable to be left behind?

Women living in rural areas: Face multiple and intersecting discrimination and limited access to employment, education, healthcare, SRHR and exclusion from decision-making.

Farmers and agricultural workers: Highly vulnerable to economic shocks, climate change and market fluctuations, leading to instability in livelihoods.

Ethnic minorities (Roma, Turk, Albanian): Face additional layers of discrimination and marginalization, leading to exclusion from essential services and economic opportunities.

Children – no access to pre-schools in rural areas; old primary school buildings with very few children limit their interaction/learning

Discrimination: remains a significant factor for marginalization and exclusion of rural population, in particular women. Women living in rural areas are disproportionately affected by educational and economic disparities, face multiple barriers to accessing basic rights and resources compared to their urban counterparts. Traditional patriarchal norms and social expectations place rural women in vulnerable situations, reinforcing gender-based discrimination. Both women and men in rural areas have limited awareness of institutional mechanisms for realization and protection of their rights. The voice of women in particular is not heard, and they are rarely consulted in policy and decision-making.

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¹²⁶ State Statistical Office, Total resident population, households and dwellings in the Republic of North Macedonia, Census 2021. According to the 2021 Census, there are 705.357 rural residents, of which 358.135 are male and 347.722 are female.

Geography: Geographical disparities in North Macedonia's rural areas significantly affect the access to essential services. These areas have poor road infrastructure, limited public transportation and lack of clear drinking water that are contributing to marginalization and exclusion of rural communities. The analysis on rural villages reveals that only 5 out of 22 villages are connected to a sewage system, highlighting severe deficiencies in sanitation infrastructure. The remote rural areas have serious problems in accessing essential healthcare services as they do not have primary health care physicians, dentists, or pharmacies. This creates significant barriers for rural residents, forcing them to travel long distances and incur additional costs. Children, women and older persons who due to unavailability of public transport are also dependent on male adult members to access education and health services are disproportionately affected by the inadequacies of the rural infrastructure.

Shocks and fragility: Reliance on agriculture, limited educational, health and employment opportunities, inadequate community support systems and prevalence of poverty make farmers more vulnerable to economic and environmental shocks. The economic and infrastructural challenges faced by rural communities limit their ability to recover from natural disasters, hinder effective response and recovery, leaving them at high risk of gaps in service delivery, prolonged economic disruption following environmental shocks and lack of preparedness for reoccurrence.

Governance: Rural populations are largely excluded from policy and decision-making processes. Local governance structures, including Local Gender Equality Commissions are often inactive or under-resourced, leaving men and women in rural areas without a say in decisions that affect their life. The lack of meaningful consultations means that policies developed at the national and municipal levels often fail to reflect their specific needs. Such disconnection between rural populations and governance structures contributes to perpetuating inequalities and marginalization. Women in rural areas are also less informed about recognizing and reporting violence and seeking protection (24% vs. 36% for urban women). Women from ethnic minorities, like Albanian and Roma women, face even greater challenges. 129

Socio-economic status: The labor market in rural areas is characterized by a weak supply of jobs, leading to "internal migration" of educated and skilled labor to other areas in search of work. This reduces the available workforce in rural areas, particularly skilled workers, which in turn diminishes the attractiveness for investment. The national programs aimed at activating unemployed persons and improving economic conditions

¹²⁷ State Statistical Office, Total resident population, households and dwellings in the Republic of North Macedonia, Census 2021. According to the 2021 Census, there are 705,357 residents in rural areas, of which 358.135 are male and 347.722 are female.

¹²⁸ Tošeska, M. (2022). *Life in Our Villages: Challenges and Opportunities*. AGRO LIDER

¹²⁹ OSCE (2019). OSCE-Led Survey on Violence Against Women: The Well-Being and Safety of Women in North Macedonia.

are not accessible to rural residents.¹³⁰ Unemployment among women in rural areas is significantly higher compared to men in rural areas and women in urban areas. The main reason is lack of social support services, such as childcare, that would enable them to actively seek employment. Women in rural areas are predominantly unpaid family workers.

Educational opportunities in rural areas are underdeveloped, resulting in a significant gap in educational attainment compared to urban areas. A significant portion of the rural population has only primary education, limiting their employment prospects for better income jobs. Access to primary and secondary education is available but is insufficient and not inclusive. Only 56% of rural settlements have a primary school up to the ninth grade within the village, and a significant number of households do not have access to kindergartens. The combined classes, where students from different grades are taught together, do not provide a quality education. Many families are unable to afford transportation for their children to attend schools in urban areas, leading to reliance on under-resourced local schools, especially in mountainous or remote areas. The lack of nearby healthcare facilities (with 23% reporting the nearest facility being more than 10 kilometres away) further exacerbates these challenges, especially for those with lower incomes, as they face additional transportation costs. 133

Why are they left behind?

Societal and cultural norms

Deeply entrenched patriarchal norms and values in rural areas place women in traditional roles as caregivers for young and older members of the households. Women are particularly disadvantaged in the labor market in rural areas, as they are often confined to unpaid domestic and agricultural work. They face many limitations in exercising the rights to health, education, employment and participation in public and political life. Women's economic dependency on male family members makes it difficult for them to achieve financial independence or escape abusive situations. A significant number of girls are dropping out of school due to early marriage or the need to assist with family work. Men, although more economically active, are also expected to uphold traditional roles as primary earners, making a living mainly from agriculture that brings

¹³⁰ Tošeska, M. (2022). Life in Our Villages: Challenges and Opportunities. AGRO LIDER

¹³¹ Tuna, Emelj, and Ana Simonovska. 2022. Multidimensional Poverty Analysis in North Macedonia. National Federation of Farmers.

¹³² Focus group discussions with rural population

¹³³ Pavlovski, B., &Frishchikj, J. (2022). When the Place of Living Determines Health – Access to Primary Health Care for Rural Population in the Republic of North Macedonia. Association for Emancipation, Solidarity, and Equality of Women – ESE.

low and instable income, with little opportunities to engage in diverse and higher income economic activities. This traditional division of labor within rural households reinforces poverty, discrimination and marginalization compared to urban population.

Geographic isolation and poor infrastructure

Poor infrastructure significantly impacts the ability of rural communities to access basic services, including healthcare, education and employment, reducing their mobility and connectivity. The limited access to quality education exacerbates inequalities and socioeconomic disparities between rural and urban populations. There are no opportunities for continued education and skills enhancement, and often rural low-income families cannot afford to send children and youth in the cities for a better-quality education. Healthcare facilities are not available in all rural settlements that further exacerbates their vulnerability and life expectancy.

Persons working in the agricultural sector are not registered as farmers

Although being registered as farmers is a basis for enjoying benefits coming out of an employment such as state subsidies, unemployment insurance, disability benefits, pension, etc., only a small portion of those actively working in agriculture are registered as farmers, primarily because they perceive an unbalance between the financial obligations of being registered and the benefits or rights they would receive in return. The reasons are multiple. For many individuals, the primary motivation for registering as farmers is to access state subsidies. However, the restrictive eligibility criteria and biases in the subsidy allocation process often discourage them from pursuing registration. The absence of maternity/paternity salary coverage and sick leave is another significant factor discouraging women from registering as farmers. Another reason is the increase of the financial obligations toward the State over time, resulting in decreased number of registered farmers and programs for rural development and agriculture, which are not reflecting the real situation of registered farmers and their actual needs.

Rural communities are largely underrepresented in governance structures and excluded from public and political life.

Their concerns and needs are not taken into consideration in decision-making and resource allocation both at the national and local level. Despite the disadvantaged position of rural women, there has been little effort to promote gender equality at the local level, and most gender equality initiatives remain underfunded and poorly implemented. There are no proactive measures to address exclusion of rural women in decision-making.

What can be done?

Policy and legal framework

- Support the Government in the design and implementation of active employment measures and inclusion of rural population in the labor market, diversifying and reducing their dependence solely on agriculture.
- Improve the benefits for farmers and make registration of farming activities a more attractive one.
- Revise the annual programs for rural development and agriculture, including the
 restrictive criteria for state subsidies (such as age, the need to pay in advance and
 receive refund, the type of support that does not correlate to the priority needs of
 famers etc.), create measures that are responsive to the needs of agriculture
 workers.
- Support the Government in implementing measures for development of rural communities and increasing the public spending needed to improve access to healthcare, education and social service, such as kindergartens, early childhood development centers, schools, care centers for older persons, healthcare facilities, which will create new and better-paid jobs especially for women living in these areas.

Institutional capacities and governance

- Increase rural representation in national and local governance structures (quotas) and promote active participation of rural communities in decision-making processes, implementation and monitoring, with a special emphasis on ensuring meaningful participation of women and other groups in vulnerable situation.
- Strengthen the capacity and functionality of local Gender Equality Commissions by providing resources and training to ensure that rural women's needs are met.

Education and awareness

- Launch campaigns to empower rural women as agents of change and strengthen knowledge about their rights, gender equality and non-discrimination.
- Provide targeted educational programs for rural women, focusing on developing skills in sectors beyond agriculture, such as technology, healthcare and education, to expand employment opportunities.
- Promote media and digital literacy among rural population, especially among youth.

Roma persons

According to the 2021 census data, Roma persons account for 2.53% of the total resident population in North Macedonia. Roma ethnic minority faces various forms of discrimination, stigmatization, social exclusion, and significant disparities across multiple domains, including health, education, employment, participation in public and political life, etc. Despite many policies for Roma Inclusion since 2005, there has been no significant progress in improving the situation of Roma persons in the country. Young Roma women and children are in the most vulnerable situations to be left behind. Among Roma women aged 20-24living in Roma settlements, 45% reported they married before the age of 18 and 8% married before age of 15, according to UNICEF Multi Indicator Cluster Survey. 134 Furthermore, according to MICS, 19% of Roma adolescents (aged 15-19) MICS reported to have had birth or were pregnant before age of 18 (3.5% is the national average). The Ombudsman reported that 328 of 337 street children are child beggars, and 97% of them were Roma in 2018 (72% boys; 38% girls). According to the data collected by the mobile teams for identification, assistance and referral of potential victims of trafficking and victims of trafficking, during 2018-2023, 56% of all identified domestic child survivors of trafficking were Roma, out of which 83% were Roma girls victims of sexual exploitation and forced marriages.

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Who is most vulnerable to be left behind?

Roma with disabilities: Face challenges in accessing basic rights and services, and lower education and health outcomes **LGBTI+ Roma**: face exclusion from both Roma and broader communities.

Older Roma: Often experience worse health outcomes, shorter life expectancy, and higher risks of chronic diseases

Roma children: Are particularly vulnerable to poverty and severe material deprivation, resulting in limited access to education, healthcare, and basic needs and rights.

Discrimination: Roma persons in North Macedonia face multiple and structural forms of discrimination across different sectors. According to FRA analysis, 25% of Roma experienced discrimination when seeking employment, 12% of Roma felt discriminated against when accessing healthcare, 19% encountered discrimination in housing, 46% of Roma children attend schools where most pupils are also Roma, demonstrating the

¹³⁴ UNICEF (2019) Multi Indicator Cluster Survey – MICS. Skopje. Available online: <u>Multiple Indicator Cluster survey | UNICEF North Macedonia</u>

extent of educational segregation. 135 However, only 2% reported the incidents, primarily due to a lack of knowledge of their rights and available mechanisms and remedies to hold those responsible to account. Roma with disabilities are also highly marginalized, with 11% of Roma with disabilities more likely to report discrimination than those without disabilities. 136

According to the latest 2023 Situational Analysis¹³⁷ of street children in the social protection system, there was a 43% increase in street children in Skopje in 2022, compared to 2021. These children are often found on the streets with their parents, family members, or other adults who exploit them. This issue remains prevalent, particularly within Roma communities, where children are disproportionately affected by living on the streets, further highlighting the need for interventions and support.

Geography: Roma persons live in urban areas but the lack of adequate infrastructure significantly impacts their access to essential rights and services, such as water and clean and safe environment. This results in "ghettoization" and isolation. 40% of Roma live in illegal housing units (apartments) in specific area of the city, and government efforts to legalize them have been slow. ¹³⁸

Socio-economic status: Roma have the lowest socio-economic status in North Macedonia. Key indicators highlight severe inequalities that Roma persons face: 75% of Roma persons live at risk of poverty, compared to 22% of the general population; 62% of Roma persons live in severe material deprivation, and 69% of Roma children live in households with severe material deprivation; employment rates for Roma persons are twice lower than the national average and the fact that majority of Roma persons are long-term unemployed speaks of their stigmatization on the labour market. Education is another critical issue. Roma children are severely underrepresented in early childhood education. Dropout rates among Roma children, especially girls, remain high. Literacy rate among Roma girls and women (aged 15 - 24) is 71.8%, compared to 98.1%

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¹³⁵ FRA (2022) Roma in 10 European countries. Main results - ROMA SURVEY 2021 (europa.eu)

¹³⁶ Ibid

¹³⁷ Institute for social activity (2023) Situation analysis of street children in the social protection system, Skopje. Available online: <u>JU ZAVOD ZA SOCIJALNI DEJNOSTI -SKOPJE (zsd.gov.mk)</u>

¹³⁸ In 2022, 99% of Roma settlements lacked adequate infrastructure, such as paved roads and waste collection services; 97% of Roma lived in settlements without atmospheric water drains, making these communities particularly vulnerable to environmental shocks like floods; 10% of Roma lacked access to a proper drinking water supply;

 $^{^{139}}$ Only 2% of Roma children aged 3-5 are enrolled in kindergartens, compared to the national average of 43%.

 $^{^{140}}$ The dropout rate in primary education is 6.83%, and 11% in secondary education, limiting their future employment prospects.

among women from the general population. 141 Only 2% of Roma children are enrolled in pre-school education vis-a-vis the national average of 43%, while 20% of children from Roma settlements do not attend primary school (the national average is 2%). As they grow, the attendance further drops, as 60% of children from Roma settlements do not attend secondary school (the national average is 10%)

Shocks and fragility: Roma persons are highly susceptible to economic, environmental, and health crises due to their precarious living conditions and reliance on informal employment. The COVID-19 pandemic, for instance, led to significant income loss, with 35% of Roma women who worked as informal hygiene workers and 50% of informal waste collectors reporting reduced incomes. Unpredictable expenses such as medical treatment often leads to catastrophic financial spending of Roma households. Roma settlements are frequently located in hazardous areas near contaminated industrial sites or illegal landfills. 22% of Roma persons live near environmentally hazardous locations, and 16% of Roma persons rely on coal, wood, or waste for cooking, further exacerbating health risks. 142

Governance: "Roma persons and their representative organizations (CSOs) are insufficiently consulted and have no meaningful participation in the development and implementation of policies". ¹⁴³ Even though it is a national priority, only 11 municipalities have adopted Local Action Plans for Roma inclusion. The National Coordinative Body for Roma Inclusion includes only one Roma CSO representative, which is insufficient to voice the concerns of Roma persons. ¹⁴⁴

Why are they left behind?

Discrimination

Roma communities in North Macedonia historically face a multitude of deeply entrenched social, economic, and institutional barriers that hinder enjoyment of their fundamental rights, progress and inclusion. Discrimination against Roma is deeply embedded in cultural and societal norms. Prejudices and stereotypes about Roma are prevailing, contributing to multiple barriers in exercising their rights, poverty and exclusion from social, public and political life. Social exclusion often leads to the

 $^{^{141}}$ Source: MICS 2018-2019- shows that only 31% of children in Roma settlements achieve basic reading skills and 19% of children in Roma settlements achieve foundational numeracy skills (64% and 41% national average).

¹⁴² Ibid

¹⁴³ Focus group discussions with Roma

¹⁴⁴ Interview with Mabera Kamberi, State Advisor, Ministry of Social Policy, Demography and Youth

stigmatization of Roma communities, resulting in isolation and diminished opportunities for advancement.

Substandard housing and infrastructure

Despite governmental efforts to legalize Roma settlements and houses, 40% of Roma persons continue to live in illegal housing units, and 99% of Roma settlements lack adequate infrastructure, including paved roads and waste collection services. The absence of detailed urban plans for many Roma settlements not only violates their human rights but also hinders the legal recognition of their homes, which in turn limits their access to basic services and social support.

Unemployment and economic dependency

The employment rate among Roma is 23%, which is drastically lower than the national average of 45.4%. Additionally, 67% of Roma face long-term unemployment, which is most prevalent among those with little to no formal education. Employment opportunities for Roma persons are scarce, and when available, they are often in low-wage, manual work in informal sectors, such as waste collection. The dependency on informal labor entrenches poverty and limits opportunities for upward mobility.

Exclusion from safety nets

Due to high dependence on informal work, Roma persons do not have benefits stemming from employment contract, such as paid leave from work (including maternity/paternity), paid health insurance both for the employed person and eligible members of his/her family, pension benefits, unemployment benefits, disability benefits. This exacerbates Roma vulnerability to financial hardship and economic shocks.

Low education outcomes

Completed secondary education have 41% of Roma persons aged 20-24, compared to the national average of 94%. This further restricts their access to formal employment and development, securing stable, well-paying jobs, and perpetuates the cycle of poverty and economic marginalization. 146

¹⁴⁵ Source: MICS 2018-2019

¹⁴⁶ Ibid

What can be done?

Policy and legal framework

- Advocacy and technical support in aligning national legislation on antidiscrimination and hate speech with international human rights standards and EU directives.
- Accelerate implementation of the 2022 –2030 National Strategy for Roma Inclusion and the 2023-2025annual Action Plan including NAPs for: Antigypsyism, Employment and Social inclusion, Citizen's registration, Housing, Health, Culture and Education.
- Support the Government in fast-track legalization procedure of Roma dwellings and settlements and planning public expenditures to improve conditions.

Institutional capacities and governance

- Promote consultations and participation of Roma, especially Roma women and youth, in policy making, implementation, monitoring and evaluation at national and local level.
- Assist in establishing accessible and culturally sensitive mechanisms and pathways for Roma persons to report unequal treatment and bias motivated violence and provide counselling and legal assistance based on public-private partnership.
- Support advancement of education outcomes of Roma children by subsidizing attendance in early childhood education centers, prevent school dropout rates through mentorship and scholarship programs, particularly during the early teenage years.
- Institutionalize and finance outreach and support mechanisms that support Roma address barriers to access services.
- Target Roma persons into formalization of the seasonal, occasional and temporary work arrangements that will introduce them to the safety nets.

Education and awareness

- Launch a broad Antigypsyism campaign to tackle anti-Roma prejudice and stereotypes, including with a focus on frontline workers (health, education, protection) and promote positive narratives and respect for Roma persons.
- Step up the knowledge and awareness among Roma about their human rights and remedies for protection, including discrimination. Produce outreach materials in Romani language tailored to different literacy levels.
- Strengthen knowledge and capacities of duty bearers on equality and nondiscrimination, and accountability mechanisms.

- Promote actions against child marriages and raise awareness on child marriages' risks to child education, health, safety (human trafficking), etc.
- Promote preventive actions as well as provision of assistance, support and referral to relevant services for Roma Street children.

Women

Women account for 50.4% of North Macedonia's population, and for the first time since 1948, the proportion of women has exceeded that of men. Most of the women live in urban areas, i.e. 62.5% live in urban areas, while 37.5% live in rural regions. The average age for women in North Macedonia is 41.7 years, compared to 39.9 years for men. The ethnic composition is the following: Macedonian 545.719; Albanian 223.638; Turks 35.047; Roma 22.803; Serbian 11.040 and Bosnian 8.142.

The life expectancy is 76.8 years, which is 4.4 years longer than men. These figures highlight the specific needs of aging women in terms of healthcare, social security, and long-term care. The total fertility rate shows that women are increasingly choosing to have only one child, which affects social policy in areas like family support, childcare, and employment. Women with disabilities represent 55.4% of the disabled population, underscoring the intersecting of gender and disability related discrimination.

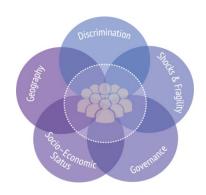
Women constitute a significant portion of the potential labor force in the country, representing over half (51%) of the working population, however, a substantial majority of these women (56%) are inactive and not actively seeking employment. In addition, women are still underrepresented in political and public life. Following the 2024 parliamentary elections, 37.5% of women became MPs, but only three women were appointed as ministers (out of 17), and only two women were elected as mayors out of 81 municipalities in the 2021 local elections. 149

¹⁴⁷ SSO (2021) Population Census

¹⁴⁸ SSO (2023) Women and Men in North Macedonia

¹⁴⁹ SEC 2024

Who is most vulnerable to be left behind?



Unemployed women – economic dependency on male family members

Roma women and women from other ethnic groups – face marginalization

Women living in rural areas -limited access to economic opportunities, education and health services

Women with disabilities—lack of physical and institutional accessibility to healthcare, education, and employment

Women survivors of VAW and domestic violence—ineffective protection, limited access to justice and opportunities to resolve legal problems

Discrimination: Patriarchal social norms that reinforce gender inequalities and high acceptance of gender stereotypes regarding women's role in family and society are contributing to the unequal treatment of women, limited access to goods and services, and restricted exercise of their legally guaranteed rights compared to men. Gender-based discrimination intersects with factors such as age, ethnicity, and geographic location, exacerbating the marginalization of women in our society. Groups of women who are furthest left behind, including Roma women and women from other ethnic groups, such as Albanian and Turk, women in rural areas, women with disabilities, women survivors of GBV and domestic violence and human trafficking, 150 migrant women, asylum seekers, and refugees - experience multiple and intersecting forms of discrimination, further deepening their precarious situations. 151 The Commission for Prevention and Protection against Discrimination (CPPD) noted 48 cases of sex-based discrimination from 2020 to 2024, with most complaints related to public information and media, labor relations, and social security. 152

Geography: "In addition to the ethnicity, geography plays a role that women living in rural areas, women wearing hijab, and older women become more vulnerable to be left

¹⁵⁰Human trafficking is a crime and the most serious form of gender-based violence. Between 2018-2022, out of 78 identified victims, 49 were adults and 29 minors. 77.41% of the identified victims are children (mainly girls, 95.83%). Among the presumed victims, most of them 114 are girls, 76 boys and 49 women. ¹⁵¹ CEDAW Committee, Concluding observations on the sixth periodic report of the former Yugoslav Republic of Macedonia, 2018

 $^{^{152}}$ Commission for Prevention and Protection against Discrimination, Analytics – completed proceedings on individual complaints on discrimination based on sex, as of August 5th 2024, available at https://kszd.mk

behind".153 Geographical disparities significantly impact women's access to resources, opportunities, and overall quality of life, especially for women in rural areas who make up 37.5% of the female population in the country. These women face limited access to healthcare, education, and employment opportunities due to inadequate road infrastructure and limited public transportation. In addition, women do not usually have a driving license, which further increases their dependence on male family members when no public transport service is provided. Many rural areas also lack access to basic utilities like clean water, sanitation, and electricity, placing a disproportionate burden on women responsible for managing household chores. At the same time women are the primary caregivers for children, the elderly and ill family members. The absence of adequate institutional support, such as accessible kindergartens and care homes for the elderly, particularly in rural areas, further restricts their economic opportunities and limits their ability to engage in other personal and professional pursuits.

Shocks and fragility: Women are in vulnerable situations because of economic, environmental, and social shocks due to existing inequalities and limited access to resources. Persons in vulnerable situations, such as rural women, Roma women, survivors of domestic violence, survivors of human trafficking and women with disabilities, are disproportionately affected during times of crisis. For example, the COVID-19 pandemic in 2020 led to a decreased employment rate and reduced incomes among women, with the average income of employed women reduced by 8,146 MKD. The pandemic also exacerbated vulnerabilities for women survivors of domestic violence, as institutional responses were inadequate.

Governance: Experiences of Albanian and Roma women show that "public institutions staff (even women) give priority to men over women, showing disrespectful and offensive behavior", ¹⁵⁴ or even refuse to serve a woman is she comes alone, demanding for a male companion in order to provide a certain service. As a result, many women still perceive public institutions as forbidden space for them. "Women survivors of GBV and domestic violence who report domestic violence to the police or to the centers for social work are faced with passive and ineffective response by the practitioners, unlike the response when violence is reported by men". ¹⁵⁵

Socio-economic status: Women tend to be economically inactive, with lower rate of employment. Rate of inactivity is highest among women aged 20-24, which accounts up to 59%, while 87% of all women in this age group are enrolled in higher education. The proportion of women living in rural are in the structure of the economically inactive population is much higher compared to the women from urban areas. "Employment in public institutions is highly influenced by political parties and they prioritize men over

¹⁵³ Focus Group Discussion

¹⁵⁴ Focus group discussion

¹⁵⁵ Ibid

women, irrespective of personal experience and qualities". 156 Due to early marriage, dropout rates are higher among Roma women, while women in rural areas have limited access to higher education because of childcare and family responsibilities. Access to healthcare remains to be a concern for women living in rural areas, as a result of lack of comprehensive health services, including maternal and reproductive health services, distance and lack of public transport to the health facilities in the nearest cities. 157

Table 9. Economic activity and employment rates for women compared to men

Category	Men	Women	Total
Working age population	750.340 (49%)	775.026 (51%)	1.525,366
Economically active	404.567 (56%)	313.202 (44%)	717.769
Employed	342.873 (56%)	265.647 (44%)	608.520
Unemployed	61.694 (56%)	47.555 (44%)	109.249

Source: State Statistical Office, Census 2021

Why Are They Left Behind?

Cultural and Societal Norms

Deep-rooted patriarchal values and gender stereotypes continue to subjugate women, particularly in rural areas and among ethnic minorities. These norms reinforce the belief that women should prioritize domestic responsibilities over education or employment. Such societal expectations limit women's participation in decision-making processes, political life, and the workforce. Every second woman in the country suffered psychological violence, with high tolerance threshold to domestic violence among the general public with significant proportion treating it as private matter that should be dealt with at home. 158

Costly and ineffective protection from gender-based and domestic violence

Despite the established formal protection system since 2004, women survivors of domestic violence are neither effectively protected, nor they can resolve emerging problems as a result of domestic violence, such as divorce, custody and child alimony, property division, damage compensation etc.¹⁵⁹ The barriers experienced by survivors to claim their rights, the limited access to free legal aid and the unaffordable court and

157 Association ESE, Access to health care for rural population in North Macedonia 2022

¹⁵⁶ Ibid

¹⁵⁸OSCE-led Survey on VAW, North Macedonia 2019

¹⁵⁹ Association ESE, Exemption from payment of court fees as obstacle or opportunity for women survivors of domestic violence, 2021

forensic fees remain to be an issue of concern for this group of women. ¹⁶⁰ The cost analysis for women survivors of domestic violence shows that women bear high costs related to health services, lost job and reduced income, relocation and any other costs as a result of domestic violence and over 90% of women survivors had to borrow money from family, friends, relatives or take loans to cover the costs and living expenses for them and their children. The State social financial support provided through Centers for Social Welfare is not planned in accordance with the needs of women survivors and their children, neither is accessible to all the women in need. In addition, domestic violence abusers do not pay the child support allowance, and there is a lack of established effective payment mechanisms by the State. ¹⁶¹

What can be done?

Policy and legal framework

- Adopt mandatory consultation mechanisms and establish practice within decision-making processes to ensure meaningful input from women's CSOs and groups of women in the most vulnerable situations.
- Develop and adopt the 2024-2027 National Strategy for Prevention and Protection against Violence against Women (VAW) and Domestic Violence, incorporating specific objectives tailored to groups of women in most vulnerable situation and ensuring budget allocations that align with the actual needs of women survivors.
- Adopt new Law on Gender Equality.
- Adopt changes and amendments to Law on Free Legal Aid with a view to guarantee approval of secondary legal aid for women survivors of VAW and domestic violence, including attorney representation and exemption from court fees and forensic costs payment in civil court proceeding regarding protection and resolution of other related legal problems: divorce, child custody and alimony, property division, damage compensation, and other court procedures.
- Adopt changes and amendments in the Law on Social Protection in order to address social (long-term) housing for women survivors of VAW and domestic violence and provision of financial support for compensation of living costs for women survivors and their children.
- Adopt Law on Temporary Child Support aimed at providing financial compensation in cases where court-ordered child support is not paid by the responsible parent.

¹⁶⁰ CEDAW Committee, Concluding observations on the sixth periodic report of the former Yugoslav Republic of Macedonia, 2018

¹⁶¹ Association ESE, Are children's needs met through child support?

- Establish separate State fund for financial support of women survivors of domestic violence and these children.
- Reinforce gender responsive planning and budgeting and ensure that all national and local budgets are gender responsive.
- Strengthen the enforcement of anti-discrimination laws by allocating more resources to the Commission for Prevention and Protection against Discrimination (CPPD) to ensure the legally guaranteed financial autonomy of this body; and introduce sanctions for institutions and employers who practice discrimination, particularly in the areas of employment and access to public services.
- Introduce targeted measures for better infrastructure development, transport services, and the establishment of local kindergartens and elderly care centers to reduce the care giving burden on women.
- Strengthen the provisions that improve access to free legal aid and reduce the costs of legal proceedings for women survivors of GBV and domestic violence.
- Explore the opportunities for legal recognition of unpaid home work of women and adopt measures for increasing the participation of women on the labor market, with focus on women living in rural areas and other groups of women in most vulnerable situation.

Implementation capacities and governance

- Establish a comprehensive system for monitoring, data collection, and evaluation
 to assess the implementation and impact of the legal framework on gender
 equality. This system should include standardized indicators, periodic reporting,
 and transparent evaluation processes that track progress across sectors, identify
 gaps, and ensure accountability at all levels of government and institutions.
 Regular engagement with civil society and gender experts will enhance data
 accuracy and support informed policy adjustments to address emerging
 challenges effectively.
- Strengthen the local and national gender equality mechanisms, coupled with human resources to implement gender policies effectively, including the 2022-2027 Strategy for Gender Equality, 2022-2026 National Strategy and Action Plans for Equality and Non-discrimination.
- The Ministry of Interior, Ministry of Justice, Ministry of Health, and Ministry of Social Policy, Demographics, and Youth should fulfil their legal obligations under Articles 17-20 of the Law on Prevention and Protection from Violence Against Women and Domestic Violence by planning and allocating dedicated annual budget funds for the prevention of VAW and domestic violence.
- The Ministry of social protection, demography and youth should revise the procedure for provision of social one-term financial support to all women

- survivors of VAW and domestic violence, and provide clear guidelines to Centers for Social Welfare on how to proceed.
- Develop mechanisms for better coordination between government institutions, civil society, and local authorities to ensure that the needs of women in vulnerable situations- especially women living in rural areas, belonging to ethnic minorities, and living with disabilities are integrated into public policies and national development strategies. This will improve support and service delivery, especially in rural areas, where women frequently face disrespect and bias when seeking public services.

Awareness and Education

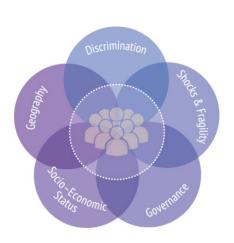
- Comprehensive State driven awareness-raising campaigns targeting both rural and urban communities to challenge gender stereotypes and cultural norms that limit women's roles should be launched and implemented in continuity on national level. Campaigns should target separately different groups of women in most vulnerable situation and focus on promoting gender equality, nondiscrimination, and the importance of women's participation in the workforce, education, and political life.
- The Government and other relevant actors should provide regular gendersensitivity training for public servants, healthcare professionals, and educators to reduce institutional discrimination. Particularly in rural areas, implement educational programs about women's rights and the available mechanisms for seeking protection from discrimination and violence.
- Initiate comprehensive national awareness campaigns to enhance public understanding of gender-based and domestic violence, using diverse communication channels to reach and empower women in vulnerable situations, including those in rural areas, and women from Roma, Albanian, Turkish, and other ethnic communities, as well as women with disabilities. These campaigns should focus on educating women to recognize signs of violence, encourage them to seek support, and inform them of legal mechanisms of protection and their legally guaranteed rights. This includes detailed information on rights that facilitate resolution of issues related to domestic violence, such as exemptions from court fees; access to free legal aid in matters like divorce, child custody, alimony, property division, compensation for damages; financial assistance and opportunities for economic empowerment and other social and economic rights.
- Ensure continuous, systemic training for practitioners from Centers for Social Work, police, judiciary, and health institutions handling cases of gender-based and domestic violence. Additionally, organize forums and educational events to facilitate the exchange of best practices among practitioners on critical aspects of their work, including risk assessment, victim support and communication,

implementation of protective measures, urgent and temporary protection orders, and effective criminal investigation and penal policies.

Persons with rare diseases

This section illustrates the multifaceted barriers faced by individuals with rare diseases and their families, highlighting the need for comprehensive support systems that address the intersectional challenges of discrimination, geography, economic vulnerability, governance, and socio-economic hardship.

Discrimination: People with rare diseases experience significant discrimination, stemming largely from a lack of public understanding and systemic neglect within



Who is most vulnerable to be left behind?

Children with Rare Diseases: delayed diagnosis and lack access to specialized education and healthcare support Mothers as Primary Caregivers: burden of caregiving responsibilities, leading to economic and emotional strain Families with Multiple Members Affected by Rare Diseases: Experience compounded financial and emotional burdens, as multiple individuals in the same household may require intensive and costly care.

Low-Income Families: Face higher risk of poverty due to the high costs of medical care, travel for specialized treatment. People in Rural Areas: Have limited access to specialized healthcare facilities, requiring frequent travel to urban centers, Individuals with Psychosocial Challenges: face social stigma, leading to isolation and limited support from community networks, affecting mental health and social well-being.

healthcare, education, and employment sectors. The rarity and diversity of these conditions mean that few people, including many healthcare professionals, fully understand the needs of those affected. This lack of awareness often results in social stigma, with many patients and their families hesitant to discuss their condition openly. In fact, over 37% of families report reluctance to share their diagnosis due to fear of discrimination, which leads to increased isolation. Educational institutions and workplaces are often unprepared to make accommodations, limiting patients' access to essential services and contributing to feelings of marginalization. Moreover, this discrimination is compounded for women, who are often primary caregivers and face additional social and economic pressures, particularly in settings where gender norms restrict care giving to female family members.

Geography: Geographic location is a critical barrier to effective care for people with rare diseases. Specialized healthcare facilities and professionals are generally concentrated in urban areas, which makes accessing consistent, high-quality care a challenge for those in rural or remote locations. Rural patients must often travel long distances to receive

treatment, adding substantial financial and emotional burdens on families. These travel requirements mean that patients are less likely to receive timely diagnoses and continuous care, leading to worsened health outcomes over time. Families in rural regions bear higher costs, not only for travel but also for accommodation near urban treatment centers. This geographic disparity limits access to early intervention and specialized support, further disadvantaging families already coping with the demands of a rare disease.

Shocks and fragility: Living with a rare disease imposes a high degree of economic vulnerability. The cost of treatment, specialized medical equipment, and ongoing care for rare diseases often leads to financial instability. Studies show that 7 out of 10 caregivers reduce their working hours or stop working altogether to care for an affected family member. This lost income places families at risk of poverty, with many relying on a single income or drawing from savings to meet care expenses. Unexpected health crises — such as hospitalizations, disease progression, or the need for new treatment options — exacerbate this vulnerability, creating cycles of debt and financial hardship. Furthermore, only a small percentage of the vulnerable population receives social assistance, leaving many families without a safety net to help absorb the costs of care. This financial instability also makes these families more susceptible to housing and food insecurity, compounding their health and socio-economic challenges.

Governance: Ineffective governance and a lack of cohesive policy frameworks make it difficult for people with rare diseases to access comprehensive care. Although the country has taken some steps towards supporting these patients — such as forming a commission in 2009 and planning a National Strategy for Rare Diseases — these efforts are often delayed or underfunded, leaving many patients without essential services. There is a significant gap in policy enforcement, with rare diseases still lacking full recognition in legal and social welfare frameworks. This lack of policy coherence means that funding for rare diseases remains limited, and the responsibility for care frequently falls on individual families rather than the healthcare system. Additionally, fragmented coordination between healthcare providers, social services, and local government agencies results in inconsistent care, leading to gaps in diagnosis, treatment, and ongoing support. This absence of structured policy also hinders data collection, making it challenging to identify the exact needs of this population and plan accordingly.

Socio economic status: The socio-economic burden of rare diseases on families is profound. Families dealing with a rare disease often incur significant costs for medications, therapies, and assistive devices, with few or no subsidies available to offset these expenses. Employment opportunities are restricted for both patients and caregivers, as employers may be unwilling or unable to make accommodations. Caregivers, particularly mothers, often face employment discrimination when they attempt to balance work with the demands of care giving. Additionally, the chronic nature of rare diseases frequently forces patients and caregivers to compromise their educational and career aspirations, as they prioritize immediate health needs over long-term goals. The resulting lower income levels and limited career progression reinforce cycles of poverty and social exclusion. With only 11% of vulnerable families

receiving social assistance, many households cannot escape this socio-economic trap, leaving them with fewer opportunities to improve their quality of life.

Why they are left behind?

Structural poverty

Families with rare disease patients bear high out-of-pocket costs for medication, treatment, and frequent travel. With only 11% of vulnerable individuals receiving social support, most families shoulder the expenses alone. Additionally, 7 in 10 caregivers reduce work hours or stop working, leading to substantial income loss and increased poverty risk.

Lack of Infrastructure

Specialized medical and support infrastructure for rare diseases is scarce, particularly outside major urban areas. Patients face delays in accessing diagnosis, therapy, and consistent care. Travel time and expenses for specialized treatment add to the financial burden. This lack of accessible healthcare infrastructure leaves many without essential support.

Social Discrimination

Due to limited public awareness, people with rare diseases often face misunderstanding and stigmatization. Over 37% of patients and families report hesitancy in sharing their conditions with friends or community members, leading to social isolation. Schools and workplaces are often unprepared to accommodate their unique needs, limiting education and employment opportunities.

Inadequate Governance

Weak policy implementation and fragmented support systems hinder effective care for rare disease patients. Although initiatives exist, there is no formalized and enforced strategy, and support services lack adequate funding. This results in delayed or insufficient care, affecting the quality of life and socio-economic stability of families.

What needs to be done?

Policy and Legislative Changes

 Adopt a National Strategy: Develop and implement a comprehensive national strategy for rare diseases that includes healthcare, social, and employment support.

- Expand Social Protection Programs: Increase financial support for families with rare diseases, covering medical, travel, and caregiving costs.
- Inclusive Education and Employment Policies: Enforce policies that mandate accommodations in schools and workplaces for those affected by rare diseases.

Healthcare and Infrastructure Improvements

- Increase Access to Specialized Care: Establish regional healthcare facilities equipped to diagnose and treat rare diseases to reduce travel burdens.
- Provide Financial Subsidies: Implement subsidies for lifelong medication and therapeutic treatments to reduce out-of-pocket expenses for families.
- Train Healthcare Providers: Increase training on rare diseases for medical professionals to improve early diagnosis and care standards across all regions.

Awareness and Community Support

- Launch Public Awareness Campaigns: Educate the public about rare diseases to reduce stigma and promote social inclusion.
- Support for Caregivers: Establish mental health and social support programs tailored for caregivers, who face increased stress and isolation.
- School and Workplace Programs: Implement training for educators and employers to support the needs of people with rare diseases in educational and professional settings.

Data Collection and Monitoring

- Develop a National Registry: Establish a registry to track rare disease patients, improving data accuracy and resource allocation.
- Regular Monitoring and Reporting: Implement systems to track the progress of support initiatives and measure the effectiveness of policies in improving quality of life for affected families.

ANNEXES

Annex 1. Research Plan

(Please note: the proposed methods might be replaced with other methods for data collection depending on the circumstances during the research)

	focus groups vith youth age	MEF, National Youth Council,	CRPM	22.08.2024 (10:00 MKD)
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	MKD and one in	Youth can,		
	LB) mixed in	Organized youth		23.08.2024
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	-3 expert	Ministry of social		
	nterviews	policy, demography		
		and youth; optional		

Persons deprived of liberty (detainees, prisoners, people who use drugs, etc.)	1 Focus group discussion in MKD (mixed in terms of gender, ethnicity, age, rural) 6 expert interviews	with others identified in accordance with the findings from focus groups HOPS, Star network, MYLA, Helsinki committee, MCMS, Horizon, Pleiades, Victim Ohrid, right holders, academia Department for sanctions under MJ, MOI, NCBCVET, Ministry of education, Ministry of health	CRPM	22.08.2024 14:00
Refugees, migrants, asylum seekers, stateless people	1 focus group discussion in MKD (mixed in terms of gender, age and rural) 2-3 interviews with institutions	LA STRADA, MYLA, Helsinki committee, Center for legal analysis, Luludi, CID Kumanovo, right holders, academia Ministry of social policy, MARRI, National commission for trafficking	CRPM	23.08.2024 14:00
Ethnic minorities (Roma, Egyptians, Yuruks)	1 focus group discussion in MKD (mixed in terms of gender, age, socio-economic status) 2-3 interviews with practitioners from CSOs 1-3 expert interviews	Romano Chacipe, IRIZ, Stanica PET, Romalitiko, Luludi, Romaverzitas, right holders, academia Ministry of social policy, demography and youth; optional with others identified in	ESE	20.08 2024 10:00 Shuto Orizari

	1.2 focus group	accordance with the findings from focus group	ESE	23.08.2024
	1-2 focus group discussion in MKD (mixed in terms of gender, age and place of living)	Stanica PET Prilep, Rural Coalition, LAG Agro Lider		13:00 Crniliste, Municipality of Dolneni
Rural population	1-2 expert interviews with practitioners from CSOs			
	2 expert interviews	Ministry of agriculture, forestry and water management; optional with others identified in accordance with the findings from focus group		
Persons with disability Persons with psychosocial	2-3 expert interviews with practitioners from CSOs	Poraka Nasa, Poraka, Polio Plus, Natasa Asociation of invalids, right holders, academia	ESE	29.08.2024 11:00
disabilities People with intellectual disabilities	1-2 expert interviews	Ministry of social policy, demography and youth; optional with others identified in accordance with the findings from interviews with CSOs		
	2-3 expert interviews with	Zaedno posilni, HOPS, HERA, Star	CRPM	12-23.08 2024

People living with HIV, sex workers	practitioners from CSOs 1-2 expert interviews	Network, rights holders Ministry health; optional with others identified in accordance with the findings from interviews with CSOs		
LGBTI+	2 – 3 expert interviews with practitioners from CSOs or shared questionnaire 1-2 expert interviews	Coalition Margin, LGBTI support centre, Ekvalis, Lezfem, Transforma Ministry of social policy, demography		12-23.08 2024
		and youth; optional with others identified in accordance with the findings from interviews with CSOs		
People with rare diseases	1-2 expert interviews with CSOs or shared questionnaire trough national alliance	National Alliance of Rare Diseases	ESE	23-30.08. 2024
	1-2 expert interviews	Ministry health; optimal with others identified in accordance with the findings from interviews with CSOs		

Annex 2. Focus Group discussion guidelines

Purpose: The aim of the focus group discussions will be to gather data regarding their current situation, challenges which they face, potential root causes for the situation and challenges which they face, and their needs and perceptions for the improvement of the situation. The focus group discussion will be structured in order to gather data based on the five factors framework.

Number of people conducting the focus groups: 1 (1- facilitator and note taker/the FGD are taped with a recorder for verification purposes)

Number of participants: 8 – 10 people (recruit 15, in case of last minute cancellations)

Equipment: recorder, laptop, notebook, pens

Refreshments: Water, Tea/coffee and cakes at the start and halfway through, and light refreshments at the end

Proposed breakdown of time:

Total time -> 125 min

5 min	Welcoming and Introductory briefing
20 min	Question 1
20 min	Question 2
10 min	Coffee Break
20 min	Question 3
20 min	Question 4
20 min	Question 5
10 min	Conclusion

Proposed setting: Round table

Focus group stages:

Stage 1: Select the participants

Participants are required to be CSO representatives, right holders and/or representatives of academia that are knowledgeable, have clear track record of activities, projects, publications and experiences with the vulnerability of the group, their status and the barriers they face to realize rights. In selection of the participants, we need to:

- 1. Seek diversity (elderly, LGBTI, and people living in rural areas).
- 2. Have every focus group made up of a combination of CSO representatives, right holders and/or academia.
- 3. Avoid people who are likely to be intimidating or over dominant (preferably not people from the same organization present at the same group).
- 4. Utilize professional networks, if necessary.
- 5. Keep the participant list a secret.

Stage 2: Decide on time and location

The focus group session will take 125min. The location should be additionally determined by UNDP, in each of the locations as per plan. The organizers must ensure that participants are comfortable, so choose an easily accessible location, that can but does not need to have a formal setting and provide translation in those locations indicated in the plan. If necessary, send out guidelines on how to reach the location together with participant invitation letter.

Stage 3: Set-up

The facilitator and note taker (if taped the discussion, note taker is not needed) should arrive to the location well in advance and prepare the room. The desired setting is ROUND TABLE (or just a circle of chairs, see above). CHECK and SET-UP all the equipment, including translation.

Preferably use two recording devices at the same time, since failure of recording devices is a common issue in focus groups. After the discussion, once the recording has been checked and you are certain that it has got the full discussion, you may delete the other.

Stage 4: Welcoming and Introductory briefing

- 1. Introduce yourself and the main purpose of the focus group and its objectives: to identify current situation, challenges which they face, potential root causes for the situation and challenges which they face, and their needs and perceptions for the improvement of the situation. Ensure participants that what they explain will be kept confidential, and that it is essential that they speak freely. Try to create a trusting environment.
- 2. Explain the structure and planned progress of the group.
- 3. Ask for any questions and ensure everyone has signed the PARTICIPANT CONSENT FORM.
- 4. Do an introductory round with everyone identifying themselves on the recorder as well (this will make it easier to identify the participants later on).

Stage 5: Start the session

Please follow the structure of the pre-set focus group flow and make sure to keep time. Read the short facilitator's guide in advance and be well prepared.

Ouestions:

Guiding questions to investigate discrimination: What biases, exclusion or mistreatment do people face based on one or more aspect of their identity (ascribed or assumed), including prominently gender as well as ethnicity, age, class, disability, sexual orientation, religion, nationality, indigenous, migratory status etc.?

Guiding questions to investigate geography:

Who endures isolation, vulnerability, missing or inferior public services, transportation, internet or other infrastructure gaps due to their place of residence?

Guiding questions to investigate governance:

Where do people face disadvantage due to ineffective, unjust, unaccountable or unresponsive global, national and/or sub-national institutions? Who is affected by inequitable, inadequate or unjust laws, policies, processes or budgets? Who is less or unable to gain influence or participate meaningfully in the decisions that affect them?

Guiding questions to investigate socio-economic status:

Who faces deprivation or disadvantages in terms of income, life expectancy and educational attainment? Who has less chances to stay healthy, be nourished and educated? Compete in the labour market? Acquire wealth and/or benefit from quality health care, clean water, sanitation, energy, social protection and financial services?

Guiding questions to investigate shocks and fragility:

Who is more exposed and/or vulnerable to setbacks due to the impacts of climate change, natural hazards, violence, conflict, displacement, health emergencies, economic downturns, price or other shocks?

Stage 6: Wrap up the session

End the session with a few concluding remarks and sum up of the main points/ issues raised during the focus group session. You may wish to get their approval on your summary at the end and give them a chance to add to your summary. Thank the participants and invite them for refreshments.

Annex 3. Interview questionnaire for decision makers and practitioners

The LNOB approach:

- emphases inclusiveness in societies by addressing systematic discrimination and marginalization and promoting social and economic equity.
- enables participation and empowerment of right holders, especially disadvantaged and marginalized people and communities in the policy development leading to more inclusive decision-making processes that reflect the specific needs of disadvantaged groups.
- recognizes that people may face multiple forms of discrimination, deprivations and inequality (see the LNOB five intersecting factors below) and seeks to address these intersecting risk factors.
- encourages and fosters collaboration and partnership among different stakeholders including the authorities and government institutions as duty bearers, judiciary and other accountability bodies, as well as national human rights institutions, civil society, academia, media, opinion leaders to work together in accelerating a just, inclusive and sustained development.
- emphasizes accountability, monitoring and evaluation of laws, policies and programs and institutional frameworks, to ensure that they are reaching the most marginalized and vulnerable groups and that they are aligned with the UN SDG indicator framework.

General Questions

- 1. Can you describe your role and how it relates to the LNOB approach?
- 2. What are the primary objectives of your ministry/institution concerning the LNOR?
- 3. How do you define "vulnerable groups" within the context of LNOB in North Macedonia?

Inclusion of vulnerable groups

- 4. How do you involve vulnerable groups in the planning and implementation of LNOB initiatives?
- 5. What channels do you use to gather feedback from these groups, which groups are consulted and how is this feedback incorporated into your programs?

Policy and Implementation

- 6. What specific policies or programs has your ministry/institution implemented to support vulnerable groups?
- 7. How do you ensure that these policies are inclusive and reach the most marginalized communities?
- 8. Which vulnerable groups and subgroups are targeted with the existing policies?
- 9. What are the key challenges you face in implementing these policies?

Coordination and Collaboration

- 10. How does your ministry/institution collaborate with other government bodies, CSOs, and international organizations on LNOB initiatives?
- 11. Can you provide examples of successful collaborations that have positively impacted vulnerable groups?

Monitoring and Evaluation

- 12. What mechanisms are in place to monitor and evaluate the effectiveness of your LNOB initiatives?
- 13. How do you collect and use data to improve the outcomes for vulnerable groups?
- 14. Can you share any recent findings or insights from your monitoring and evaluation processes?

Resource Allocation

- 15. How are resources allocated to ensure the effective implementation of LNOB programs?
- 16. What measures are taken to ensure transparency and accountability in the use of these resources?

Capacity Building

- 17. What training or capacity-building efforts are in place for staff working on LNOB initiatives?
- 18. How do you ensure that practitioners are equipped with the necessary skills and knowledge to effectively support vulnerable groups?
- 19. Please provide information about the type of trainings organized: which vulnerable group was targeted, who participated, duration of trainings and type (basic or specialized).

Successes and Lessons Learned

- 20. Can you highlight some of the successes your ministry/institution has achieved in supporting vulnerable groups?
- 21. What lessons have you learned from past initiatives, and how have these lessons informed current practices?

Future Plans

- 22. What are your ministry/institution's future plans and priorities for advancing the LNOB agenda?
- 23. How do you envision the role of your ministry/institution evolving in the next five years concerning LNOB?

