

Disability Taskforce, up-dates July

In July the Disability Taskforce held three coordination meetings (July 1st, July 15th and July 29th). The agenda of each meeting was established based on the needs and suggestions of group members and covered the following subjects that were discussed:

- Challenges faced by CSOs offering support to refugees with disabilities;
- Multi-Sector Needs Assessment in Moldova findings on disability;
- Blue Dots: activities and services provided for children and families and UNICEF support in facilitating access to medical services of children;
- EU Air transfer procedures, challenges and results in assisting persons with disabilities and serious chronic diseases;
- Activity of the Accommodation and Transportation Taskforce and challenges of Refugee Accommodation Centers that host persons with disabilities (case of Greblesti RAC);
- The future role and activity of the Disability Taskforce;

Additionally, each meeting included updates on the activities and support provided by members of the Disability Taskforce and from other working groups. An assessment and feedback on the activity of the Disability Taskforce and future intervention was initiated and Terms of Reference for the Disability Taskforce were drafted and submitted to the group members for feedback. These activities will serve for reviewing the work of the Disability Taskforce in order to strategy better its activity and respond efficiently and quickly to the needs of refugees with disabilities.

Assistance of refugees with disabilities

- In total, 433 Ukrainian refugees with disabilities and serious chronic diseases received targeted assistance and support in July. The assistance was provided by six local NGOs: Keystone Moldova, Motivatie, Low Vision, SOS Autism, CASMED and OSORC *(OSORC Rehabilitation and Counseling Center operates in Tiraspol, Transnistrian region).
- 54 Ukrainian refugees with disabilities received information and counselling through Keystone Moldova Hotline Support Service in the last month, 30% of them called repeatedly for assistance.
- Keystone Moldova Mobile Team reached 136 refugees with disabilities and serious chronic diseases in host families and refugee accommodation centers. By the end of July, Keystone Moldova Mobile Team extended it

interventions from Chisinau to other rayons and now it is covering refugees accommodated in 23 rayons.

- 210 refugees with disabilities and serious chronic diseases have benefitted from food packages and 11 received special diet products (gluten-free, sugar-free, etc.); 200 received hygiene packages and 62 received clothing and footwear. The essential food and non-food items were provided mainly by Keystone Moldova, Motivatie and OSORC.
- 134 refugees with disabilities and serious chronic diseases were covered with medicines by Keystone Moldova, Motivatie, CASMED and OSORC. By the end of July 61 refugees benefitted also from medical examinations covered financially by Keystone Moldova, OSORC and Low Vision. Medical devices (glucometers, tests, stoma, anti-scarring mattresses) were offered to 13 refugees and assistive devices (walking frames, crutches, wheelchairs, hearing aids, optical correction devices) were provided to 23 refugees by Keystone Moldova, Low Vision and OSORC. SOS Autism and OSORC provided early intervention rehabilitation services to 23 children with disabilities, including Autism Spectrum Disorders.
- In case of 75 refugees with disabilities and serious chronic diseases a complex needs assessment was conducted in order to establish the necessary interventions by Keystone Moldova, OSORC and CASMED; 49 refugees benefitted from information support and were referred to other services; legal assistance was provided to 38 refugees by OSORC; transport services were offered to 18 refugees with disabilities and adapted transport was offered mainly by Motivatie; 6 refugees were supported to identify an accommodation facility (house/apartment) by Keystone Moldova and other 6 refugees were offered accommodation within OSORC and SOS Autism office spaces to facilitate the provision of services; 73 refugees received psychological counseling from CASMED and OSORC specialists; 169 refugees received financial support and 29 children benefitted from an adapted playground due to interventions of OSORC. Two organizations () offered their organizations' spaces for accommodation of 6 beneficiaries.

Identified Needs and Remaining Gaps

- There is still no data on the number of refugees with disabilities, including children staying in the Republic of Moldova and a mapping exercise would be needed to better plan and finance the interventions aiming at assistance and inclusion of this group of refugees.
- Remuneration of CSOs' staff that provide services to refugees with disabilities, additionally to their local beneficiaries, remains an issue to be

solved through identification of additional funds and employment of new specialists.

- Lack of accessibility of Refugee Accommodation Centers (RACs) and host communities facilities remain a major problem for inclusion of refugees with various types disabilities. Interventions are urgently needed in ensuring the accessibility of facilities that are mainly accommodating persons with disabilities.
- Reduced access to specialized medical services as well as lack of resources to buy the necessary medications by persons with chronic diseases, mental health problems, epileptic syndrome and other medical conditions remain a serious issue that currently lies on the shoulders of NGOs. Medical and assistive devices are still insufficient to cover the needs of persons with disabilities. Financial coverage of health programs for refugees with disabilities and serious chronic diseases are urgently needed.
- Lack of/limited knowledge of stakeholders on disability inclusion, understanding the needs of persons with disabilities for a more inclusive refugee response. Capacity building of relevant stakeholders (staff of RACs, social services providers, LPAs, Bureau of Migration, etc) is needed for increasing the knowledge and awareness of disability inclusion in an emergency. Financial resources are needed for the members of the disability taskforce to plan and conduct informative sessions on disability mainstreaming in the refugee responses.