

FYR MACEDONIA

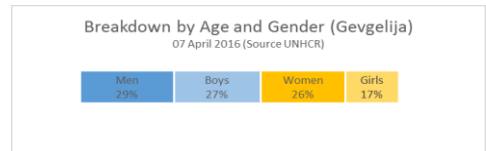
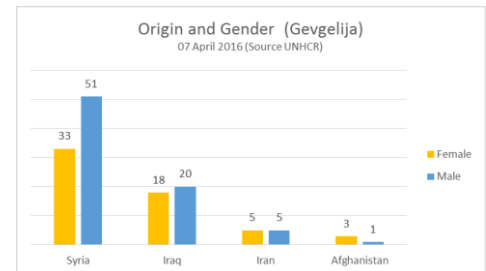
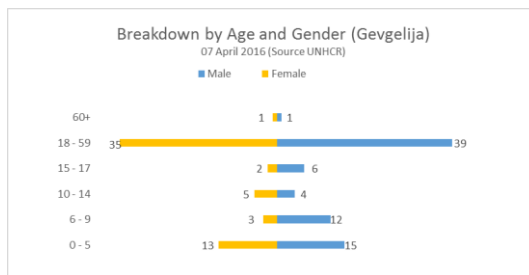
7 April 2016

PROFILING OF PERSONS OF CONCERN IN GEVGELIJA SITE

Methodology: Following the same methodology used in Tabanovce, UNHCR profiled the refugees and migrants on an individual basis in family groups noting nationality, age, gender, and specific needs.

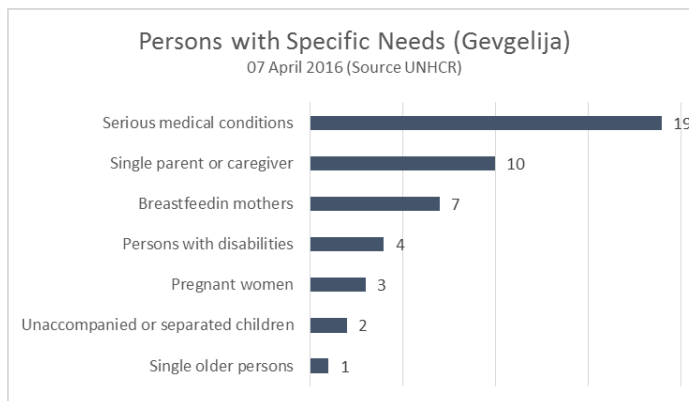
SOCIO-DEMOGRAPHIC INFORMATION

- **136 persons / 37 households** are staying inside the site (126 persons) or in the habitat rub hall outside (10 persons).
- **62% from Syria, 28 % from Iraq, 7% from Iran, and 3% from Afghanistan.**

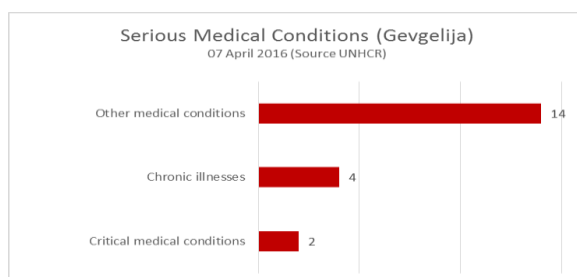


- **40 men; 37 boys; 36 women; and 23 girls**

BREAKDOWN BY SPECIFIC NEEDS¹



Serious Medical Conditions



Serious medical conditions that require assistance in terms of treatment or provision of nutritional and non-food items.

- **20** persons have serious medical conditions, including chronic illnesses (diabetes, heart disease, anaemia, high blood pressure, etc.).
- **Two** have a critical medical condition.

¹ A number of the specific needs were self-declared by the persons of concern as at the stage of profiling there was no mechanism to verify statements, namely medical conditions.

Recommendations:

- Refer persons with urgent medical needs and chronic medical conditions to health care providers for immediate treatment.
- Enhance outreach by mobile teams to identify additional medical cases – Red Cross and Ministry of Health.
- Procure necessary medications, including anti-biotics. Refugees are unable to buy the medicines they need even if they have the money, while some others do not have money to buy medicine.
- Provide appropriate food for persons with specific medical conditions like diabetes or who have allergies.
- Ensure that persons distressed by mental health and psychosocial problems have access to appropriate specialized care.

Unaccompanied or separated children (UASC) and children at risk

UASC: Persons below the age of 18 who are currently not under the care of either a parent or other legal or customary primary caregiver. Children at risk: Person below the age of 18 who is at risk due to his/her age, dependency and/or immaturity.

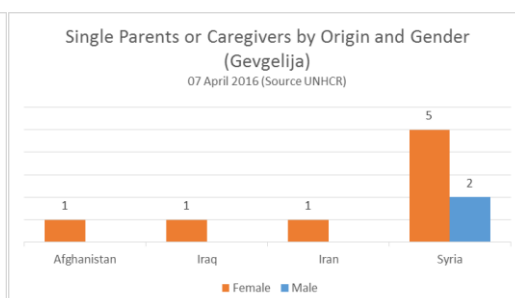
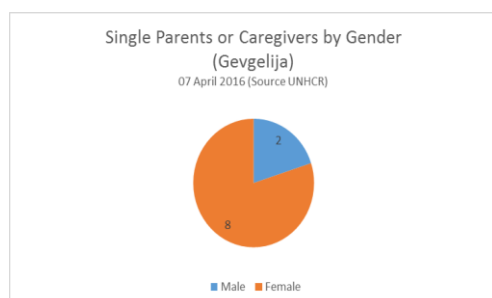
- There are **no Unaccompanied Children** in Vinojug reception centre
- **Two** are Separated Children, both boys (17 years old)

Recommendations:

- Conduct Best Interest Assessments for Separated Children.
- Ensure that girls and boys with specific needs receive targeted support, including tailored distributions.

Single parents or caregivers

Single person or person travelling alone of 18 years or above with one or more dependants, including biological or non-biological children, or other dependants (such as an older person).



- 10 are single parents or caregivers (8 women, two men).
- 7 are from Syria, one from Afghanistan, one from Iraq, and one from Iran.
- One woman head of household is nine months pregnant.
- One woman head of household with three children has a critical medical condition.

- Four women heads of households declared their husbands are in European countries (Germany, Sweden, Finland)

Recommendations:

- Conduct participatory assessment with this group in order to determine their safety and protection concerns, as well as most vital needs and required services.
- Single parents can be more vulnerable since they have often lost their support system. Put in place SGBV prevention and response measures to protect these individuals.

Breastfeeding mothers

Infants and children need adequate nutrition in the first two years of life for their wellbeing and development; otherwise the child could suffer irreversible damage. Emergency situations can seriously threaten breastfeeding practices and subsequently impact child nutrition, health and survival.

- **Seven** women are breastfeeding mothers in the site.



Recommendations:

- Determine if women/girls may need to be enrolled in a supplementary feeding or nutrition program for medical or other reasons.
- Monitor unregulated distribution of breast milk supplements, such as powdered milk, as they may undermine a woman's efforts to breastfeed.
- Specific and extra efforts must be promoted to ensure that a woman's right to breastfeed is promoted – if necessary specialist support could be provided to reinforce and restore their confidence and capacity to breastfeed.

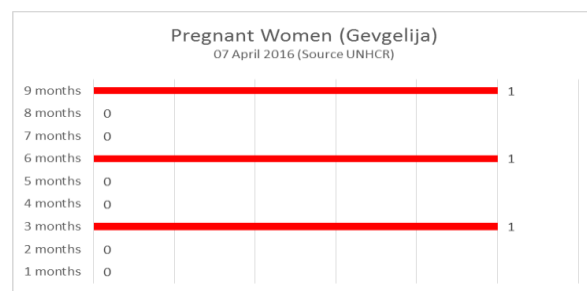
Pregnant women

Pregnant women may have more limited mobility, especially in advanced stages of pregnancy, and may have to rely more heavily on the support of partners or family members if they have them.

- **Three** women are pregnant, including one nine months pregnant woman.

Recommendations:

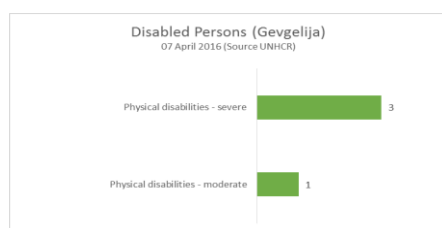
- Ensure access to the gynaecological clinic for regular screening, and provide information on what to do and where to go if the woman goes into labour.
- Provide additional NFIs to pregnant women such as appropriate clothing.
- Make certain women have access to nutritious and sufficient food.



Persons with disabilities

Persons with disabilities who require assistance to access services, including distributions as well as infrastructure that is accessible to persons with limited mobility.

- **Four** persons have disabilities with limited access to services, of which 2 men, one woman and 1 girl.
- **Three** have severe disabilities, of which one is a 10 months girl.



Recommendations:

- Monitor and follow up on the situation of persons with disabilities.
- Ensure that persons suffering from moderate or severe physical disabilities have access to appropriate care.
- Ensure food and other distributions are accessible to persons with limited mobility. Consider separate queues, transport support, or “home delivery”.

Older persons at risk

Persons 60 years old or above, with specific needs in addition to their age, including single older persons, frail older persons and older couples, who require assistance to access services, including distributions.

- **One** is a male single older persons at risk. His family members (wife and children) are all in Germany.

Recommendations:

- In consultation with them, move them close to facilities and services in the site.
- Ensure that protection and assistance programmes are accessible to older persons on an equal footing as they specifically complained that they did not have access to distributions (i.e. ensure they can obtain food or non-food items through distributions, monitor and consider creating separate queues, provide transport, set-up “home delivery”).
- Identify their other needs and the difficulties they may face in meeting them. Monitor and follow up the situation of older persons.

General recommendations:

- Establish and maintain a confidential individual case management system.
- Constantly reach out to the population to identify, monitor and follow up on additional cases that may exist.
- Fully inform individuals with specific needs of the protection and assistance services that they are entitled to access, notably distribution systems.
- Provide mental health and psycho-social support by specialists as needed across different groups.
- Put in place SGBV prevention and mitigation measures, and strengthen referral mechanisms. Also, procure PEP kits and preposition one or two in each site.
- Ensure access to family planning and reproductive health services.

Please contact UNHCR for any specific request for statistics or other information regarding this population.

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Links: [Facebook - UNHCR Skopje](#) ; [Refugee/Migrants Emergency Response - Mediterranean](#)