Taskforce on refugees with disabilities Minutes, 1 July 2022

	Taskforce on refugees with disabilities	Location	Remote – via Zoom
Chair	Ludmila Malcoci, Keystone Moldova	Date and Time	01 July 2022, 10:00 -11:00
Taskforce members participating	Alliance of Organizations of Persons with Disabilities in Moldova (AOPD), REACH Initiative, Humanity for Inclusion, IM Swedish Development Partr		tional, OHCHR, UNHCR,
Agenda Items	Main Points Discussed	Actions	Responsible Persons
General Information	Ludmila Malcoci has informed about another group working inclusively on the disability issues having been created that has already started to create a confusion between groups' members and that it should definitely be tackled in order not to overlap the good channels already set up and duplicate the efforts. She has appreciated the work and engagement of the members of the Disability task force and making use of the good reference mechanisms put in place and has emphasized the importance of having new members on board supporting all efforts undertaken, especially those providing support for rehabilitation services, given the lack of such services in the country.		
Updates on the activities/support provided by members of the Disability Taskforce and from other working groups	Keystone mentioned that they had structured the reports in order to have a more advanced and disaggregated data based on a set of indicators, including for distribution purposes, so a better support could be planned. During the last 2 weeks, Keystone Moldova supported around 100 refugees with disabilities with hotline services, covering and offering medication services and support given the fact that there are many poor families with no money for medication. The majority of these people that had been referred from UNHCR, Ministry of Labor and Social Protection had also required support for medication which was	Humanity and Inclusion has recruited an Accessibility officer who will work on designing/construction of accessible facilities and if needed can offer support to other organisations. Their Humanitarian Inclusion Technical Adviser will work on inclusion activities; hence, the	

provided based on needs assessment and intermediary assistance to a more qualified and specialized health support in health facilit		
Requests for hygienic packages, clothes, footwear were also received 5 people out of all people supported by Keystone Moldova www.women.	d. in activities was also	
Referring to the Transnistrian region of Moldova, OSORC Rehabilitat and Counselling Center from Tiraspol, assisted 119 refugees w disabilities of which 34 adults, 36 elderly and 49 children.		
From 100 refugees, 84 are staying in host families and 23 are rentin place, 50 persons representing women and 50 men. Referring to disability degree: 55 persons - moderated disability degree, 16 perso - accentuated disability degree and 2 with a severe one. They h received financial support, hygienic packages, food and nutrit products, including special diet products for 5 persons.	ne n	Commented [CM1]: Aici poate se poate uita dna Malcoci in privinta datelor, anume la partea cu 65 femei intr-un paragraf si-n altul 50 femei ca sa fie corect prezentate datele.
17 persons received transport and adapted transportation service accommodation, medication, medical equipment; 6 persons - assist devices; 61 persons - clothes, footwear. Ludmila Malcoci apprecia the strong cooperation between the NGOs from the left bank and ri bank so that the majority of the needs from the left bank be supported.	ve ed ht	
Low Vision NGO provided medical consultancy services and assist devices to 10 visual impaired refugees, from which 4 adults, 4 elde and 2 children, 9 of them being placed in shelters and 1 in a host fam	rly	
CASMED NGO provided assistance in terms of accommodation, med rehabilitation, medicines and psychological counselling to 4 adu refugees with disabilities.		
SOS Autism NGO provided support to 4 boys, 3 of them with autispectrum disorder and 1 with Down syndrome.	m	

	Motivatie NGO provided assistance in terms of adapted transportation, gluten free products to 36 families who had a family member with disabilities. HelpAge International continues to provide food and non-food items at community refugee centers and trying to expend at the level of host families level. In terms of cash assistance, they feel that the current one does not cover the additional costs, so they have some proposals to cover these costs especially in case of older PwD. In some of their proposals, they are also planning to support in developing community safe spaces, especially technical support in terms of making them inclusive for older PwD, they have outreach services planned with volunteers providing homebased care to older PwD unable to access these spaces. They also had a discussion in the Assistance technology WG set up by WHO and maybe a discussion is needed in terms of how technical input can be provided as the Disability WG. Humanity and Inclusion managed to recruit their team and shared some of their plans in this regard. Physical Rehabilitation officer - physical rehabilitation, referral for more complicated cases, donation of basic assistive devices. Accessibility officer: working on designing/construction of accessible facilities and if needed they can		
	offer support to other organisations. Humanitarian Inclusion Technical Adviser – to work on inclusion activities and expressed their intention to work with other partners so there is no overlap in activities.		
Call for additional advocacy	Alliance of People with Disabilities pleads for the need to continue with the advocacy to solve the existing problems. Based on the lessons learned and on the experience of the Alliance partners, several budget monitoring actions will be initiated in order to see to what extent the finances have been used to support refugees with disabilities and that will look into the possibilities to identify additional resources to what is available now. Hence, a Country Study will be conducted which will show the needs and issues of PwD placed in both centers and families and that will serve as an argument for additional financing.	Ludmila Malcoci confirmed the need to advance the advocacy and fundraise in order to offer support and not leave people behind, since the representatives of the Government are not really active in this taskforce and are not always up-to-date with	

		information available.	
		Nevertheless, she has sent the	
		Ministry of Labor and Social	
		Protection a report of	
		activities undertaken by the	
		taskforce and she is intending	
		to send such a report to the	
		State Secretary of the Ministry	
		on a regular basis and will	
		plead for meetings to be set	
		with them.	
	IM Swedish Development Partner is not a humanitarian organization,		
	therefore they work through the CSOs and since it is their first		
	experience in working in the humanitarian sector, they have highly		
	appreciated the training on humanitarian aid offered by the NRC, where		
	a more in-depth knowledge has been received. They are encouraging		
	others to attend / conduct such trainings in case of need.		
	Regarding the support related to the PwD, all their partners were		
	present at the border since the first day of the outbreak in comparison with other humanitarian organizations that took time to register and be		
	present with the support.		
Challenges faced by CSOs offering support	In terms of immediate response: food and hygienic kits were offered at		
	the border, supported to find accessible accommodation, adapted		
	transportation was provided from the border to the shelters, and		
	medicine and psychological counselling was offered. Other support		
	offered: social and economic inclusion, community mobilization,		
	educational and recreational activities. Needs assessments were		
	conducted and media materials produced to raise public awareness		
	concerning the refugee crisis, acceptance and tolerance. They are still		
	providing hot meals at the placement centers. They do also provide		
	therapy services for children with autism spectrum disorder through		
	SOS Autism. Together with Swiss Cooperation Center they had procured		
	a new adapted bus, but accessible transport is still lacking, which is an		

issue to be tackled (there is only 1 company in Chisinau which offers accessible transportation, which is often overcrowded). They have also evaluated the temporary placement centers for refugees that are meant to place PwD and they had found that none of them is accessible or they provide minimum accessibility standards. A proper solution to this problem is crucial, since a limit in discussions has been already reached. It is suggested that maybe more joint efforts are needed to be put in the communication with authorities.
A list of challenges notified by their partners has been compiled:
 Partners are overwhelmed and tired, the level of burnout is high and they are already working out of their limits with no weekends and long hours shifts. It is a big problem, as the human potential and care should be taken into consideration, as people who provide support also need it. Unfortunately, donors do not support such type of activities. Donor organization do not cover neither administrative costs. High bureaucracy is persistent, therefore they call on international organizations in contact with authorities to try to solve the issue. Procedures and legislation should be simplified, so that support activities do not face such challenges. Unfair competition among humanitarian organizations, international organizations, especially UN agencies, resulted with an overlap of activities. A solution should be identified to overcome it. Lack of accessible accommodation, lack of statistics and lack of openness on behalf of authorities to provide data about PwD refugees. This prevents correct evaluation of their needs and proper support provided. Partners have not received an updated information about the number of people placed in the shelters. So for example, the list provided by the Ministry does include people, while in reality there are 0 persons in some shelters, which raises a big question.

	 Corruption or high risk of corruption or misuse of humanitarian aid – as it is a sensitive topic, maybe some more time should be dedicated for discussion in the upcoming meetings. A proper monitoring of support activities should be done. Proposals: Not only soft, but also hard activities should be supported, for instance investment in infrastructure. Elaborate a crisis resilience plan for partners who offer support. 	
Assessments undertaken	REACH Initiative has presented their Multi-Sector Needs Assessment (MSNA) in Moldova which revealed the following findings on disability: Demography: 67% female, 37% male respondents with an average age of 31 years old; 37% of family members are children under 18, 62% families have children and 4% families have an either pregnant or lactating woman in the composition. The largest majority of individuals reporting on at least 1 disability are 60+ years consists and the proportion decreases with age category, so that only 13% from 5-17 years have a disability. Access to services: School enrolment - children with at least 1 disability were less likely to be enrolled (14% vs 8%) and the same goes to the people in need of healthcare (49% needing it vs 20% not needing healthcare). Accommodation status: those reporting having at least 1 disability were slightly more likely to live inside the RACs (15% vs 12%) and in informal RACs (6% vs 3%). Intentions: 70% vs 75% of people with at least 1 reported disability mentioned that would stay in the location, 3% would want to stay in Moldova but in a different location and 9% vs 11% would want to return	

In order to have information about disability, the Washington Group Set of Questions method was used asking 704 individuals representing families.	
*The assessment focuses on Ukrainian refugees living in RACs and in host families, but not on the third country nationals given that the primary data about them is low. The MSNA an information management exercise which aims to answer to the information gaps from the sector.	
HelpAge International has done before a rapid assessment needs for refugees with disabilities, which can be shared with everyone, but the current update focuses on the evolution of the findings since then until now. They also point out that data on PwD is not available and not disaggregated enough, but some good practices that had seen should be acknowledged, for example: REACH's latest study.	
38% older refugees are not able to access services from the day they had arrived in Moldova. The current cash assistance blanket doesn't cover the PwD needs or those of older people, nor PwD that have additional assistance needs (for example they use the money for medicines and not for food). Another issue is that all PwD refugees do not have access to non-communicable diseases medicines. HelpAge didn't find a set methodology to consult PwD, including the older ones, although this methodology is adopted at a household level, but still a disaggregated sample size mentioning that older refugees with disabilities were targeted is lacking, which poses a challenge.	
UNHCR : Findings of the Protection Monitoring Exercise: The data collection is being done continuously and, from early May, more than 1500 surveys have been collected. A periodical report (monthly or bimonthly) in this regard is in the pipeline. The findings can be accessed here: <u>https://app.powerbi.com/view?r=eyJrljoiN2Q2MGVhZTktNTY3YS00Njl</u> <u>kLWJjMjMtNT11MTk2YzdkMmVmliwidCl6ImU1YzM3OTgxLTY2NjQtND</u>	

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Potential subjects for the next meeting	 A separate discussion on corruption and misuse of humanitarian aid shall be set up. HelpAge is planning a visit to Greblesti RAC and is asked for the updates to be shared in the next meeting to understand better the situation and in case of non-accessibility, the taskforce group should advise not to refer people to that RAC. 	 Ludmila Malcoci encourages donors to support a research to be carried out by NGOs to understand better the use of financial resources, including by authorities, in relation to shelters and persons placed in host families. It is proposed that a meeting with Ministry of Labor and Social Protection is set, see what their plans in the field of RACs accessibility sense are, and identify places where people can be transferred. UNPFA suggested that in terms of RACs accessibility for people with disability should be discussed with sector of RAC and Transportation led by UNHCR. OHCHR is asked to link with them and to invite them to the next task force to have a joint discussion on 	

Main problems and gaps	• They are quite the same as discussed before, mainly limited	 UNHCR is asked to consider 	
NGOs are facing	access to cash assistance programme due to limited access to	the possibility to liaise with	
	information, lack of computers and internet; limited access to	the Ministry of Labour and	
	accessible information regarding the legalization of the refugee	Social Protection so that the shelter proposed by SOS	
	status in the country; limited access to adapted shelters; limited access to medication to persons with chronic diseases; reduced	Autism is accredited. The	
	and insufficient information about the access to medical	requests done can be shared	
	services among the refugees; limited access to assistive	with them.	
	equipment, etc.	 HelpAge International is 	
		planning to launch a cash	
	HelpAge International has also shared their observation that older PwD do not have either access to cash assistance programme or	assistance programme for	
	access to medication, or they are not able to cover those expenses	older PwD who are facing the	
	from the current cash assistance in place.	challenges mentioned and	
		they consider that a referral	
	 2 important issues emerged during the past 2 weeks: COS Autism reported that they had best d refugees with children 	mechanism in this regard	
	SOS Autism reported that they had hosted refugees with children with disabilities from March 2022 and many times families with	would be needed. Further	
	children with autism spectrum disorder were referred to them by	updates will be shared. Keystone will redirect the	
	other NGOs for hosting since they were combining hosting, shelters	calls received through their	
	and rehabilitation services. In usual shelters it's practical impossible	hotline services on the	
	for such families to live. The NGO previously got support from	matter to HelpAge.	
	various donors, but now they are receiving a limited one. They		
	wanted to register their shelters as accredited ones under the		
	Ministry of Labor and Social Protection, but they had been refused		
	by the ANAS because the other shelters in Chisinau are not fully		
	completed and beneficiaries can be redirected there.		
	Another information received – there are other centers that had		
	been registered despite not having any refugee and that had		
	benefited from assistance on behalf of the state. This is raising		
	questions among NGOs as they tried to unite forces and support the		
	Government and hence it is proposed a possibility to meet with the		
	authorities or to react in some way to be discussed.		

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There is 1 Center that is managed by 1 person with disability located		
in Greblești, and practically it was her initiative to manage the		
center and a lot of efforts have been invested by her, but		
unfortunately it is not adapted to the needs of PwD. It is proposed		
that this subject is also discussed with the Government and support		
for adaptation is requested, since all PwD are being referred there.		
Slava Luca from IM Swedish Development Partner has informed		
that CRPD has drafted a comprehensive report on this specific		
shelter and the findings are not good, as this RAC is inaccessible for		
PwD. After a follow-up meeting on the report, it was concluded that		
most probably the center should be better closed.		