

ESSN Task Force Gaziantep Minutes

Objective	<ol style="list-style-type: none"> 1. Welcome and introduction 2. Action points from the previous meeting 3. Updates on the ESSN and its implementation in the SET <ul style="list-style-type: none"> - TRC Data Management and Analysis System 4. Updates on the CCTE 5. ESSN and Disability 6. Q&A with MoH 7. AOB 		
Date of meeting	14 February 2019 09:30 - 11:30	Location	UN House, Gaziantep
		Meeting Co-Chairs	WFP: Hiba Hanano (Gonca Savas) TRC: Hanifi Kinaci

1. Action points:

Follow up issue from last Meeting:	Who will take action:	Status:
ECHO additional info request on disability figures and sweep back reasons	ESSN TF Co-Chairs	Done
Q&A session with Ministry of Health representatives on ESSN and disability	ESSN TF Co-Chairs	ESSN TF meeting on 14 February 2019
Case Study Report for ESSN Good Practices	ESSN TF Co-Chairs	Expected completion: February 2019
ESSN TF ToR to be finalized	ESSN TF Co-Chairs	Done: Feb 2019

2. Updates on the ESSN:

- The Co-Chairs World Food Programme (WFP) and Turkish Red Crescent (TRC) provided an update of the ESSN payment in January 2019 for 1,530,030 individuals (262,832 households) and noting that as of 04 February 2019, a total of 2,563,668 individuals (504,552 households) were registered; 233,271 applications were ineligible.
- **Please refer your cases having barriers accessing ESSN to TRC Outreach Teams for their follow up. TRC Outreach Teams e-mail address: kizilaykartdiserisim@kizilay.org.tr**

3. TRC Data Management and Analysis System:

- Turkish Red Crescent made a presentation on their database and analysis system. The presentation included information on ESSN's 2.5 million application pool and how this data is being used for further analysis and programmatic decisions. As an example of conducted analysis on ESSN's existing application pool, livelihood survey findings including educational background, difficulties faced in finding a job and capacities of beneficiaries were shared with participants. More details are available in attached presentation.

4. Updates on the CCTE:

- UNICEF Social Policy Officer provided an update of CCTE noting that 439,215 beneficiaries were entitled for CCTE payment in January 2019 and 47,563 beneficiaries received only CCTE top-up payment (for

the beginning of new academic semester). 211,038 Kizilaycards were uploaded with January 2019 payment. 1,526,911 Turkish beneficiaries received January 2019 payment in the national CCTE Programme.

- As of January 2019, number of children reached with at least one CCTE payment has become 487,089 and the number of Kizilaykart uploaded with January CCTE payment is 236,218.
- As of 21 January 2019, 91 % (462,243) of the CCTE applications were accepted, 8 % (43,912) of the applications were rejected and 1 % (3,341) of the applications is pending. 36 % of the applications were registered by TRC Service Centers.
- As of 16 January, 98,569 calls were received by TRC Call Center for CCTE. 56 % of the callers were women and top call category was information request.
- 13 % of the CCTE beneficiaries (61,991), who were entitled for CCTE payment in January, are registered in Gaziantep, which keeps its seat as the second province with most CCTE beneficiaries in Turkey. Among 61,991 beneficiaries, 3 % of the students are in kindergarten level, 7 % of the students are in high-school level and 90 % of the students are in primary school. 5 districts with most beneficiaries in Istanbul are respectively as follows: Sahinbey (57 %), Sehitkamil (23 %), Nizip (13%), Islahiye (3%), and Nurdagi (2 %).
- **26 SASFs, 16 Halkbank branches, 2 PECs and 3 TRC CP teams** have been visited in **9 provinces** in the Southeastern and the Eastern Mediterenian Regions since September 2018.
 - Most of the SASFs mentioned that compared to last year, refugees more are aware of the CCTE program and its application procedures.
 - It was observed that PECs and ALP students are not familiar yet about the CCTE application procedures and awareness raising is needed.
 - Child labor was identified as a barrier to access to education and CCTE. In relation to this, Sahinbey PEC deputy manager reported that ALP classes at the center were arranged according to children's schedules to mitigate barriers to access.
 - Nizip SASF reported that the closure of Nizip camp was felt at the SASF in terms of the increased caseload for social assistance (including CCTE).
 - SASFs are keen on coordination meetings to not only discuss challenges but also to share good practice examples with each other.
 - Children enrolled in ALP have been eligible to apply for the CCTE Programme as of mid-August 2018.
- The number of ALP Learners in Gaziantep was 268 among the 439,215 children paid in January 2019
- There are 5 districts in Gaziantep where ALP classes are operational: Islahiye, Nizip, Nurdagi, Sahinbey, and Sehitkamil.

5. ESSN and Disability:

- The legal framework for the provision of services and assistance for the people with disability in Turkey is based on the "Law on Persons with Impairments" dated 2005 and the "Regulation on the Impairment Criteria, Classification and Medical Board Reports to be issued for the impaired" dated 2013. These two legal documents were designed around the main principles of equality, non-discrimination, integration, full and active participation, and rehabilitation for access and education.
- Persons with disability are described as a person who due to loss of varying degrees of physical, intellectual, mental, sensory and social abilities congenitally or afterwards, has difficulty in adapting to social life and meeting daily needs, and is in need of protection, care or rehabilitation, counselling and support services. This means that disability does not only refer to either physical or mental disability but refers to the person's own capacity for survival and meeting daily needs including access to basic needs.
- The Ministry of Health and Ministry of Family, Labor and Social Services are the two responsible authorities for providing different types and levels of services and assistance for the persons with disability. Based on the type and level of the disability, there are available services including

informal/formal education, employment, social rehabilitation/integration, physical access, health and preventive services, care and rehabilitation services, financial assistance, tax deduction/exemption, etc.

- **Disability Health Report** (DHR) is the document that is needed for identification of the type and level of disability of the person. It follows the international standards as a technical and objective tool.
- **The Medical Board of Doctors** of the authorized hospitals are the authorities to provide the DHRs. The Board consists of 7 or more specialists from different departments including internal diseases, eye diseases, ear-nose-throat, general surgery or orthopaedical, neurology or mental health and diseases.
- During the identification of the **authorized state hospitals**, the Ministry of Health looks for different indicators such as having enough number of doctors and capacity and the demand from the people. If you identify a place with an insufficient number of authorized hospitals and therefore in need of capacity with provision of more DHRs, you can refer your requests to the Provincial Directorates of Health in the provinces. Please make sure that the suggested hospital has an adequate capacity to provide DHRs. And it is important to note that only two big private hospitals are in the list of authorized hospitals with enough academic and bureaucratic capacity.
- All foreigners and the citizens of Turkey can obtain DHRs from the authorized hospitals – they need to submit the ID cards and a referral letter or a written petition. Foreigners under International Protection or Temporary Protection status may need to pay the cost of around 200-250 TRY per report.
- For appeals over the results of the DHRs or reports that have missing information such as severity or validity period, please reach out to the Hospital Management or Provincial Directorates of Health in the provinces.
- There are two types of reports: temporary and indefinite (permanent). It is based on the decision of the Board of Doctors for the the validity of the reports in line with the general health/social conditions of the person. Persons with the level of disability or a medical condition that may change in due course (positively or negatively) may receive DHRs with expiry dates. It means that the Board of Doctors need to evaluate the disability and health condition of that person by the expiry date of the report.
- Main challenges to obtain DHRs for refugees are reported from the field as the cost, translation of the documents, language barriers, limited hospital capacities, long appointment periods, appeal process, expiry dates and incomplete reports such as missing the flagging as severely disabled. In addition to the main challenges and barriers, there are also different implementations in the field, especially on the cost coverage. While some hospitals do not ask for fee from the refugees with more than 1% disabilities, some asks for the cost of around 200-250 TRY, or in some cases SASFs or Sub-Governorate offices cover the costs for the vulnerable people including the refugees.
- Ministry of Health representative noted that they recently evaluated the capacity of the hospitals and have not detected any capacity issue or long appointment periods for obtaining DHRs. He added that there is no hospital detected that gives more than 4 months of appointments and requested from the partners to refer their cases to the Provincial Directorates of Health.
- Under the Emergency Social Safety Net (ESSN) Programme, WFP-TRC-MoFLSS provides two kinds of assistance to the people with disabilities and these two-assistance interlinked to each other. The first one is that one of the 6 criteria to be eligible for ESSN Assistance is “having min. one household member with more than 40% disability proved by a DHR from an authorized state hospital”. The households that meet this criterion, after the application to ESSN, start receiving 120 TRY per person per month via their Kızılaykart. This is the normal implementation since the beginning of the ESSN programme in December 2016. As of August 2018, ESSN Programme started to provide additional top-ups called **“Severe Disability Allowance”** for the ESSN eligible persons with severe disability with more than 50% disability rate and their disability is flagged as “severe” on their valid DHRs. This assistance is 600 TRY per person per month in addition to their regular ESSN assistance. This assistance is for the families that have minimum one person with severe disability who is dependent to at least one household member to take care of himself/herself. In January 2019, a total of 1.530.030 individuals received ESSN

assistance, among them 25.537 of them have more than 40% disability; and 6.330 persons with severe disability received additional top-up as “Severe Disability Allowance”. Please note that some of the ESSN beneficiaries meeting one of the other 5 criteria may also have disability without a valid DHR submitted to the SASF offices. TRC-WFP team informed all the ESSN beneficiaries to obtain DHRs for the persons with disabilities and submit to the SASF offices as soon as possible in order to benefit from this allowance.

6. **Q&A Session with MoH representatives:**

- It was clarified that one of the main barriers to access available assistance for refugees in Turkey is the DGMM registration; as only people with IDs starting with 99 numbers can obtain a DHR.
- Based on the MoH database online platform, by the end of 2018 MoH developed DHR and disabled exceeded 6 million reports registered in the system and almost 3,5 million disabled individuals are registered/befitting. As counted reports include results from 0% to 100% Disability status.
- Ministry of Health has just started an audit process in 71 provinces in terms of control, identify and complete all technical infrastructure, capacity and other technological requirements.
- All refugees have access to medical examination, polyclinics free of charge even the disabled patients have prioritization in hospitals in terms of access to these services.
- If any participant has a general recommendation or questions that cannot be solved out at a hospital, it can go to provincial directorates of health in any governorate.
- Presentation included a map of hospitals where the DHR can be obtained (private, publics and university training hospitals) – can be viewed through following link: https://khgmozellikli.saglik.gov.tr/svg/ozellikli_hizmetler.php?srr=136
- MoH is working on the creation of a new e-report system/submissions in order to be able to check all kind of medical reports provided by public hospitals. This platform is about the launch and enable the Ministry to eliminate the fraud practices and increase the coordination among the service providers.
- For now, e-birth report is the only report that is available online as other reports are still under discussion on how they will be incorporated or reflected.
- DHR is one of the most audited items as the reports opens access to many options and rights available in Turkey.
- Regarding the Disability Health Report fees, the representatives reminded participants that DHRs are not free, the cost that should be applied is around 200 TRY adding that an agreement between the Ministry of Health and the DGMM is being discussed to provide it for free.
- Appeal is the first stage of the report production, and then patient is referred to a referee hospital, then patient is under a “change request” phase which represents that his status is changing.
- The representatives reminded participants that the Provincial Health Directorate is the legitimate entity to which people should go should if they have objections to the result of the report. As for the complaints, these must be directed to the MoH hotline 184.
- Regarding medication that is originally not available in Turkey, the Ministry has asked DGMM to finance some imported medicines, so they can be accessible to refugees. The representatives also reminded participants of the fact that the National Security Scheme (SGK) does not provide medicine to refugees whereas AFAD used to transfer their request to the DGMM who is now taking over from AFAD. For the time being, these medications need to be obtained through concerned NGOs.
- Al Amal Association for Medical Services shared that they provide further assistance such as speech therapy centers that is not well covered in the provided services for refugees, as only two centers are available in Ankara and no information of similar availability in different governorates. And

highlighted that their centers are receiving children with autism and down syndrome as language barrier is eliminated.

- In Urfa, cases of autism are handled at some education centers and clinics coordinated with MoNE, but the referral and problem of communication still arise for the refugee children to access specialized education.
- Relief International is running 4 mental health centers to support refugees in Ankara, Istanbul, Kilis and Gaziantep. They provide mental health assistance via their experienced health support teams, but language barrier is still present, available translators have been trained on how to handle beneficiaries and on data protection. There are a lot of efforts and Ministry will be happy to participate in more coordination as needed.

7. Any Other Business:

- As of February 2019, ESSN TF will follow the bi-monthly meeting cycle. If you would like to attend or receive documents/invitations from those locations, reach out to sahnur.soykan@wfp.org for further requests.
- Next Meeting: The next meeting will be held **in April 2019 at Watan Gaziantep Office**. The invitation will be shared accordingly.
- Please remember to send any issues/challenges observed with as much detail as possible (location, date, etc.) to the ESSN TF focal points:

- **WFP:** Gonca Savas – email: gonca.savas@wfp.org
- **TRC:** Hanifi Kinaci – email: hanifi.kinaci@kizilay.org.tr

Attachments:

1. ESSN Task Force Gaziantep Presentation
2. TRC Data Management Presentation
3. CCTE Presentation
4. ESSN and Disability Presentation
5. Ministry of Health Presentation