



LNOB Social Mapping Report

Municipality of Klos

Author: Gender Alliance for Development Centre

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Report on LNOB Social Mapping in Municipality of Klos



Social Mapping Results Report

LNOB social mapping and evidence-based policymaking in the Municipality of Klos with a focus on Day-care Center Services for People with Disabilities

Klos Municipality / Gender Alliance for Development Center

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Executive Summary

This report examines the situation of people with disabilities in the municipality of Klos through LNOB social mapping and evidence-based policymaking, with a focus on daycare center services for people with disabilities. “Special Attention is given to the women and girls within this group. The overall aim of this report is to contribute towards the social inclusion of disadvantaged groups, improving the quality of life as well as fostering social cohesion at a local level by promoting the localization of Agenda 2030 and its objectives, in particular, the “*Leave no One Behind*” – LNOB principle at the municipal level.

A total of 783 adults and 75 children with disabilities were recorded in all administrative units of Klos municipality. The municipality of Klos has prepared the Local Social Plan, which was approved by the municipal council on 30 November 2023, for the period 2024-2027. Currently, the plan has not been published because it is awaiting approval from the prefecture. This is a crucial moment for incorporating some of the key recommendations and findings of this report into the plan. During the social mapping for people with disabilities near the municipality of Klos, various problems were identified in multiple areas. These issues require intervention from the local government, other public institutions, and/or donors, particularly to plan the establishment of a daycare center as soon as possible. This center will provide appropriate services for this category of citizens in Klos.

The following are presented and listed the main findings of the Social Mapping for people with disabilities near the Klos municipality:

- The municipality of Klos is dominated by rural areas, so the largest number of people with disabilities is concentrated in residential areas with up to 500 inhabitants.
- Almost all people with disabilities receive economic assistance from the municipality of Klos, as well as financial aid due to disability (KEMP).
- In general, there is no lack of access to potable water, electricity, or basic home facilities, but access to the Internet and technological tools remains low.
- Although the majority of interviewees in this municipality do not report a lack of food, about 8.9% of adult men and 7.4% of women with disabilities have gone without food more than a few times during the past month. The situation of children with disabilities is almost the same.
- On average, the monthly income for people with disabilities ranges from 10,000 ALL to 20,000 ALL, depending on gender.
- 97.5% of men and 93.5% of women do not have the financial means to hire someone to help them in their daily life.
- People with disabilities also face difficulties in purchasing the medications needed for their therapy.
- Despite the commitment of the municipality of Klos, there is a lack of specialized social or health services for people with disabilities.



- More than half of the interviewees (more men than women) report that their residences do not meet living standards.
- More than half of the disabled people in the municipality of Klos need specialized help, and none of them have benefited from any such service.
- All specialized services for people with disabilities are located more than 2 km from the Klos municipality, and not everyone has the financial means to access these services.
- There is no organized transportation near the municipality of Klos to help people with disabilities visit centers or receive health services outside of Klos.
- About 6% of disabled people admit that they have received patronage services from medical staff.
- Logistical access to institutions is not suitable for people with disabilities, except for the municipal building, which has a ramp at the main entrance on the first floor.
- About 65% of people with disabilities need to receive patronage services from medical staff, as it is increasingly difficult for them to travel to receive these services.
- In general, immediate family members take care of people with disabilities, with mothers primarily caring for children with disabilities.
- There is neither a day center for services nor a center for temporary stay or clubs that can serve for the socialization of people with disabilities.
- There is no center or similar facility for people with Down syndrome.
- Only three people with disabilities report that they are employed in the family business, but they do not specify their salary or insurance payment.
- None of the mothers of children with disabilities are employed because they must care for their children, preventing them from working.
- In the municipality of Klos, there is no canteen offering at least one free meal to people in need, including people with disabilities living in deep poverty. Likewise, no institution provides clothing or similar items for families who cannot afford them.
- There are no civil society organizations in the municipality of Klos that could assist in the integration or support of this target group.
- Parents of children with disabilities have complaints about the number and quality of assistant teachers, the logistical aspects of educational institutions, and the didactic information provided for this target group.
- Although the number of people who admit to feeling discriminated against is not very high, discrimination still exists, especially in public transport and interpersonal relationships.
- There is a lack of events or similar activities that can help people with disabilities to socialize and integrate into society.
- Trust in central institutions among this target group is lower than in local institutions, highlighting the cooperation between the Klos municipality and disabled people.



1. Target group(s) of the Social Mapping

When speaking about leaving no one behind, it is at the same time that this includes vulnerable groups who face a higher risk of poverty, social exclusion, discrimination, and violence compared to the general population. These groups include, but are not limited to, ethnic minorities, migrants, disabled individuals, the elderly, and isolated children. Vulnerability to discrimination and marginalization arises from various social, cultural, economic, and political factors. Women and girls within these groups often experience multiple forms of discrimination and gender-based violence, and they may encounter challenges in accessing protection, support, and remedies when their rights are violated. The target group this report is about are people with disabilities, because of all the obstacles that they face.

1.1. Explanation why the targeted population(s) is LNOB group

The guiding concept of "Leave no one Behind" (LNOB) implies a strong commitment to reducing inequality and eliminating extreme poverty in all its forms. It emphasizes the need to take concrete steps to ensure that individuals who have historically faced greater obstacles and disadvantages are given the chance to catch up with others who have made more substantial progress. People with disabilities and their families undoubtedly form an important part of the LNOB group in this respect.

People with disabilities face twofold challenges. First, they face unique and complex barriers related to their disabilities. Second, most families experience the constant burden of economic difficulties.

Beyond economic concerns, people with disabilities and their families also need social inclusion and community support. This group often faces social stigma and obstacles in their involvement in employment, education, recreational activities, and interpersonal relationships. As a result, people with disabilities risk being isolated from the wider community, which can increase their sense of vulnerability and exclusion.

In the municipality of Klos, this target group faces a series of challenges listed below:

- Economic, social, environmental and cultural challenges
- Challenges of mental health, reproductive health and access to health services
- Limited access to infrastructure
- Backward mentality for accepting children with mental and physical health problems to register them in the health and social security system to benefit from health, social, educational and economic services.

Limitations impacting the target group:

- **External factor:** Lack of services; Lack of professional skills among staff providing services for people with disabilities.
- **Internal factors:** Behavioural issues and discrimination.



The Municipality of Klos has drafted the Local Social Plan, which was approved by the City Council on 30.11.2023 and extends from 2024-2027. Currently, the plan is not published because they are waiting for approval from the prefecture. In this plan are identified various challenges confronting the local government in addressing the needs of the target group, among other important considerations.

- People with disabilities are recipients of the social protection scheme, a national mechanism funded from the state budget. Currently, the sole method of support is through 'cash payment.' However, there is a pressing need to plan and implement specific social care services that can facilitate the socio-economic empowerment of these individuals.
- Although the disability payment measure exceeds the Economic Aid offered by municipality, it remains inadequate to cover certain social care services essential for the well-being of disabled individuals.
- Furthermore, the establishment of such social care services should align with the characteristics of the group, addressing their unique needs, scale, and geographical distribution
- The high number of people with mental retardation is a cause for concern, and the need for specialized social care services is imperative.
- In the provision of treatment and specialized social care services, there is no significant focus on women and young women with disabilities due to the heightened risk of gender-based discrimination and violence.
- Women with disabilities are at a high risk of physical, psychological, economic, and sexual violence, both within and outside the family environment.
- It is needed the improve healthcare services with the measures to ensure standards and training of professionals in matters of gender equality and gender-based violence.
- Children with disabilities need early intervention with development and rehabilitation programs to facilitate their integration during growth and development.
- There is no electronic data system disaggregated by sex, age, and general and specific indicators for children with disabilities.
- Lack of Infrastructure and Access.
- Absence in Schools, Kindergartens, and Health Centers.
- Need for Development Centers and Presocial Services.
- Difficult situation for women in the family.

The National Action Plan for People with Disabilities (NAPPD) 2021-2025¹, is guiding the National policies as an inter-sectoral document of the Albanian government that includes policies dedicated to people with disabilities that will be implemented till 2025.

The purpose is to continue to promote and support the integration of people with disabilities in the socio-economic life of the country with constant attention to the fulfilment of the obligations of the Convention on the Rights of People with Disabilities

¹<https://www.konsultimipublik.gov.al/Konsultime/Detaje/333>



(CRPD)² through specific measures. The implementation of this Action Plan is being monitored by the National Council for Limited Communication through the Technical Secretariat and with the direct involvement of contact points in the line ministries.

The Agenda for Sustainable Development is a reminder of our commitment to building an inclusive world where no one is left behind. The agenda recognizes the diverse range of people whose needs should be at the forefront of our efforts. In the context of the Leave No One Behind (LNOB) principle, social mapping considers several crucial risk factors for people with disabilities:

- **Discrimination:** We recognize the barriers created by discrimination, which restrict access to vital services and opportunities.
- **Geographic Isolation:** Some people with disabilities may be isolated (living on rural areas, far from the city), making it difficult for them to access services and be fully engaged in society.
- **Vulnerability to Shocks:** This target group is more susceptible to economic, environmental, or social shocks that can worsen their existing disadvantages. Adding here also the fair and the impact of pandemics.
- **Governance at Central and Local Levels:** We evaluate the effectiveness of governance structures, encompassing legal and institutional frameworks, in addressing the unique needs of marginalized groups. But, the involvement of the families of people with disabilities is very low or does not exist.
- **Socio-economic Status:** Our approach considers multidimensional poverty, which goes beyond just income and encompasses access to education, healthcare, housing, and other essential factors that determine one's overall well-being.

1.2. Summary of the consultations with the municipal officials and other stakeholders

In order to create this report, there was close cooperation with a wide range of individuals and institutions in the community of Klos. This included representatives from local social services, schools, healthcare institutions, psychologists, and many others who play a vital role in supporting these children and their families. The purpose of these interviews was to identify the range of services available for this specific group, particularly those provided by public institutions, and to research the absence of day care centers. This report aims to highlight the challenges faced by people with disabilities, identify gaps in services, and assess the need for additional training or support for service providers.

Interviews conducted with various actors in the municipality of Klos reveal problems and deficiencies in services and support for people with disabilities.

Overall, it appears that:

- The municipality of Klos faces challenges in providing services due to the lack of civil society organizations; no organization operates in the municipality to support these individuals.

²<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>



- Services are lacking because there is not enough staff to cover all needy groups, such as people with disabilities, survivors of domestic violence, and children with disabilities.
- The road infrastructure is severely degraded, especially in villages and rural areas. Municipality staff often organize transportation to ensure these individuals do not feel excluded during municipal activities and events.
- There is currently no support program to help people with disabilities gain employment. No individuals from this group are employed in any public or private institutions.
- For girls and women, there are no specific measures, but they are included in the mobility service offered equally to all people with disabilities (adults and children).
- Cooperation between health and social institutions is functional due to a project implemented by the municipality. This project established a multidisciplinary team of doctors, nurses, psychologists, and physiotherapists to provide integrated services for families in need, especially children and adults with disabilities.
- There is a lack of infrastructure for autistic, deaf, and mute children. Schools and other institutions lack the necessary logistics. Only the Klos gymnasium and the municipal building have ramps; other schools, health centers, and institutions do not have appropriate facilities for people with disabilities.
- Public transport is lacking, and transportation within the municipality relies on private providers who are not sensitive to the mobility needs of children or adults with disabilities.
- The municipality of Klos does not have a day center for children or adults with disabilities.
- The main challenges remain the lack of infrastructure in schools and the absence of didactic tools for children with disabilities.

Parents of children with disabilities face various obstacles and challenges in their efforts to improve their situation. They are highly dependent on the road infrastructure, as some families have multiple children with disabilities. Their needs for transportation and therapy services are significant. There is a lack of essential services, such as speech therapy for autistic children and therapeutic services for adults with disabilities. Additionally, the availability of necessary medications is limited. Many families have left Klos to be closer to hospitals and health services.

The prevailing mentality is a challenge, as many parents struggle with societal prejudice against children with physical or mental disabilities. Generally, there are no widespread cases of discrimination against children with disabilities, although there are occasional instances where students exclude their peers from games or social activities at school. These cases are typically reported to the social service office, but according to their records, no specific incidents have been documented.

Furthermore, within the targeted group, there are two families who have returned from emigration and face the same lack of infrastructure and therapy services, including physiotherapy and speech therapy.



Regarding health care in villages:

- The villages lack psychosocial services.
- According to doctors, families with children who need these services often relocate.
- Services for rural areas are inadequate.
- Specialists should be trained with new models, and on-the-job training is necessary.

1.3. Summary of Secondary Data Analysis

Target group: People with Disabilities with a focus on day center services.

Based on the information received from the municipality of Klos, some data regarding the target group are listed below:

The number of adults with disabilities in the vicinity of this municipality is 783, and the number of children with disabilities is 75. The Klos administrative unit has the largest number of people with disabilities (364 individuals, with 118 being unable to work), while Gurra has the largest number of people with disabilities in rural administrative units (167 individuals, with 59 unable to work).

No studies have been conducted before for this specific target group, and there are no day care centers that can provide services for either children or adults with disabilities. Currently, Klos Municipality is in the implementation phase of a project financed by the EU. Under this project, a multifunctional center for young people will be reconstructed, and a 4x4 van will be purchased. The van will be equipped with medical supplies and will serve all needy people living in remote areas who require medical attention, including those with disabilities.

In 2023, Klos municipality was the beneficiary of the social fund program with the project "With the community for the community." Through this program, these individuals will be offered services at home by a group of professionals such as physiotherapists, psychologists, and nurses.

During the year 2023, the number of adults who benefited from the KEMP payment was 422 individuals (including those unable to work), of which 210 were women and 231 were men. Meanwhile, if the caregiving payments from the same institution are analyzed, there are only 70 people with disabilities who benefit from this payment.

As for children with disabilities, in 2023, 79 children benefited from the KEMP payment, of which 34 were girls and 45 were boys. Similarly, for children with disabilities, the guardian's payment was granted to only 14 families.

The total amount allocated for the year 2023 for people with disabilities was: ALL 91,846,011.00.



2. Brief information about Municipality of Klos and policies at the local level

Region: Dibër

Municipality: Klos

Surface area: 357.48 km²

Population: 16, 618 banorë

Administrative units: Klos, Xibër, Gurrë, Suc

Extended information about the municipality Klos³

Geographical area: Klos Municipality is situated in the North-Eastern area of Albania and is part of the Dibër District, along with three other municipalities: Dibër, Mat, and Bulqizë. It shares borders with the Municipality of Tirana to the southwest, the Municipality of Mati to the northwest, the Municipality of Bulqiza to the east, and the Municipality of Dibra to the northeast.

Population: According to the 2011 census, the population of the municipality was approximately 16,618 inhabitants, while according to the civil registry, it was 20,821 inhabitants, with a density of 78 inhabitants per km².

Agriculture and infrastructure: The agricultural area is fertile, and agricultural activity has experienced a revival in recent years. Municipal infrastructure has seen improvements over the last two decades, thanks to numerous cross-border investments. However, emigration has led to the depopulation of the area, especially among young people, leaving behind an aging population.

Other data: A significant portion of the area consists of plains, including the Mat valley, with elevations ranging from 240 meters to 600 meters above sea level. Klos serves as a crucial link connecting Dibra with Tirana. The demographic trend of population movement towards urban areas, characteristic of the Dibra region, is also observed in Klos. The primary economic sectors include agriculture, benefiting from the favorable climate for the cultivation of various crops and fruit trees, livestock farming, and service industries. Klos is abundant in natural, terrestrial, and underground resources. Municipal forests and pastures cover a considerable area, providing not only timber but also a variety of medicinal plants. Additionally, mountain and historical tourism, as well as the chrome ore industry in private mines such as Ceruja, contribute significantly to the region's income.

According to data obtained from the official website of the municipality of Klos, it has been found that social services offer various provisions. These include information and counseling services, available both in person and via telephone. Additionally, they offer support, crisis counseling, and referral services for domestic violence cases, including a 72-hour emergency service at the district level. Furthermore, they provide

³ Source: Official website of Klos Municipality: <https://bashkiaklos.gov.al/bashkia-klos-2/>



information and counseling services for child protection case management, as well as information and support services for homeless individuals in compliance with the law.

Economic Aid:

Law 57/2019, titled 'On Social Assistance in the Republic of Albania,' defines the system of assistance and social care. It aims to provide economic assistance to families of Albanian citizens who either lack income and means of living entirely or have insufficient income. Additionally, in cases where feasible, public services of state care may be offered either instead of economic assistance or as a supplement to it.

The beneficiaries of economic aid include:

- a) Families in need;
- b) Orphans who are not in institutions;
- c) Parents with more than 2 children born at the same time, belonging to families in need;
- d) Victims of trafficking, from the moment they leave social care institutions until their employment;
- e) Victims of domestic violence, for the duration of the protection order or immediate protection order..

Block Aid of 6%:

Economic aid is distributed in the form of "block aid," which means aid given entirely in cash by the state for a specific purpose. The amount of monthly economic assistance is determined by the City Council, which takes into consideration the following:

1. The block-aid fund
2. The decision of the Council of Ministers regarding the criteria for families that do not have the right to benefit from economic assistance
3. Families that have not benefited from the scoring system are treated with the 6% block-aid fund..

The Child Protection Unit is also established near the Klos municipality.⁴

According to the official information from the municipality of Klos, the following services are offered to people with disabilities:

Economic Assistance and Disabled People:

The Blind: Individuals with complete or partial loss of sight, either congenital or acquired, who have been declared incapable of work by the decision of the Medical Commission for the Determination of Blindness (KMPV).

Paraplegics and Tetraplegics: Individuals who have been declared, by the decision of the Medical Commission for Determining Ability to Work (KMCAP), to have such conditions regardless of the cause and age.

People with Disabilities: Individuals who have been declared incapable of work by the decision of the Medical Commission for Determining Ability to Work (KMCAP).

⁴ <https://bashkiaklos.gov.al/njesia-e-mbrojtjes-femijes/>



People declared disabled for work by the decision of the Medical Commission for Determining Ability to Work (KMCAP) benefit from a monthly supplement in addition to the disability pension, according to the status of disabled for work.

Beneficiaries defined above, who are determined by special medical commissions to be in need of care, also benefit from a paid caregiver.

3. Objectives of the Social Mapping

The overall aim is to contribute towards the social inclusion of disadvantaged groups in the Municipality of Klos with a focus on Day-care Center services for People with Disabilities with special attention to women/girls as a part of this group of citizens. Improving the quality of life as well as fostering social cohesion at a local level by promoting the localization of Agenda 2030 and its objectives, in particular, the Leave no One Behind – LNOB principle at the municipal level.

Specific objectives:

- Contribute towards better design of local social protection policies for vulnerable groups in harmonization with national development plans
- Support the Municipality of Klos in implementing LNOB social mapping methodology in coordination with the local government staff. The methodology is elaborated within the NALAS e-Learning course “LNOB Social Mapping and Evidence-based Policy Making”.
- Support the Municipality of Klos in the development of policy recommendations based on social mapping findings and in line with priority SDGs and respective targets.
- Support the Municipality of Klos in the integration of the policy recommendations within the respective social protection program.

Some of the research questions:

- **What is the socio-economic situation of parents or guardians of children with disabilities and adults with disabilities?** This research question aims to understand the socio-economic background of people with disabilities. The description will include factors such as employment status, household income and access to social support systems.
- **What is the income level of people with disabilities?** This question aims to assess the financial situation of people with disabilities. The analysis includes a review of the family's income, sources of income, any financial assistance or benefits received and the adequacy of the income to meet their needs.
- **What are the living conditions of people with disabilities?** This question explores the physical environment in which people with disabilities live. The description includes aspects such as the quality of the dwelling, accessibility, sanitary facilities, availability of services and security within the dwelling space.
- **What is the degree of risk and vulnerability experienced by people with disabilities?** This question explores the level of vulnerability and exposure to



risks faced by people with disabilities. The description includes factors such as exposure to discrimination, lack of access to health care, and barriers to education and social participation.

- **What services do they receive and how often?** This question examines the types of services offered to people with disabilities and the frequency of their use. The description includes services such as therapeutic interventions, educational support, employment, socialization activities and medical care.
- **What social service needs do people with disabilities have?** This question identifies the specific social service needs of people with disabilities. Requirements such as access to assistive devices, specialist healthcare services, counseling or therapy, support for inclusion in mainstream settings and advocacy for their rights.
- **What is the general well-being of people with disabilities, especially girls and women?** This question assesses the general well-being and quality of life of people with disabilities, with a focus on gender considerations, particularly for girls/women. The description also includes physical health, mental health, social integration, educational attainment and overall life satisfaction.
- **What facilities, resources and personnel in relation to social services and/or day care centers does the municipality offer?** This question examines the availability and adequacy of facilities, resources and personnel provided by the municipality to support people with disabilities. The description includes factors such as infrastructure, funding, staffing levels, training programs and accessibility features.
- **What short-term and long-term actions can the municipality take to address these issues?** This question explores possible interventions and strategies that the municipality can undertake to improve the well-being of people with disabilities and their families. The description will include, for example, policy changes, programmatic initiatives, advocacy efforts, resource allocation, and collaboration with stakeholders.

4. Methodology

Social mapping in the municipality of Klos was conducted from December 2023 to March 2024, targeting a predetermined group of people with disabilities using face-to-face surveys. The mapping covered all administrative units within Klos Municipality.

Methods for conducting social mapping of children with disabilities in the municipality of Klos:

Target group: People with disabilities

- **Field survey** – The selection of pollsters was carried out in cooperation with the Municipality of Klos. Training was prepared after finalizing the conceptual document for the mapping. Five interviewers participated in a one-day training session focused on the questionnaire and techniques for interviewing people with disabilities in the municipality. They were trained to conduct face-to-face



interviews with families (parents/guardians) of children with disabilities and adults with disabilities, using both qualitative and quantitative analysis. The interviewers then shared the personal experiences of the most marginalized individuals. A total of 232 face-to-face interviews were conducted, representing 30% of the identified people, across all administrative units of Klos Municipality.

- **Focus group discussions** - To gather evidence on the living conditions, behaviors, and perceptions of people with disabilities, three focus group discussions were organized after the field survey. Each discussion involved eight to ten people with disabilities in an informal setting to encourage open dialogue. The GADC collaborated with the Municipality of Klos, selecting the familiar municipal council hall for these discussions to foster a relaxed atmosphere and an exploratory, qualitative approach. Additionally, one focus group discussion included relevant stakeholders, bringing the total to four focus group discussions.
- **In depth interview** - For this study, interviews were conducted with a diverse group of people directly involved, including representatives from the Municipality, healthcare professionals, social workers, psychologists, individuals with disabilities, and their daily assistants. In-depth interviews were used to verify data from the municipality and validate results obtained through data analysis. Additionally, these interviews provided new insights and alternative perspectives based on the respondents' knowledge and experiences. A total of 11 in-depth interviews were conducted, including: 2 with representatives of the Municipality; 1 with a representative of a health institution; 1 social worker; 1 psychologist; 2 people with disabilities; 2 representatives of social security; 2 parents of children with disabilities.
- **Desk Research and Secondary Data Analysis** – Secondary data analysis included the use of information provided by Klos Municipality and other national level information.
- **Sampling:** In the municipality of Klos, 235 people with disabilities were interviewed in all administrative units.
- **Questionary:** Throughout the social mapping process in the municipality of Klos, a detailed questionnaire was utilized. Several adjustments were made to align with both national legislation and local needs. In total, the questionnaire comprised 125 questions.
- **List of indicators:** 1. Socio-economic status - as a risk factor; 2. Geography – as a risk factor; 3. Assessment of needs for people with disabilities (Assessment of needs based on health status; Assessment of needs for services at home; Assessment of needs for social services in the local community; Assessment of educational services and facilities) 4. Governance – as a risk factor; 5. Discrimination - as a risk factor; 6. Vulnerability to shocks – as a risk factor.
- **Pilot test:** 10 test interviews were conducted in Klos municipality. According to field monitoring, the average time to conduct the interview was 45 minutes. The questionnaire was revised during the training and there were no problems.
- **Response rate:** 98.7%



- **Data processing, cleaning and preparation program:** LimeSurvey and SPSS
- **Data analysis methods:** Descriptive statistics
- **Restrictions:** None

5. Social Mapping results

This chapter is based on the findings obtained within the research activities conducted on territory of Municipality of Klos. The results are presented for the children with disabilities following the survey structure. Each questionnaire was composed of several chapters aimed to examine the risks and vulnerability in line with the LNOB factors. The questionnaire consisted of 125 questions divided into categories as risk factors as follows:

- Socio-economic status
- Geography
- Needs assessment for children with disabilities
- Governance
- Discrimination
- Vulnerability to shocks

Main findings for each LNOB group are explained in detail with relevant data presented in charts explanation at the chapter 5.2.

5.1. Analysis of Geo-Tagging of Available Socio-Economic Resources

A total of 783 adults and 75 children with disabilities were recorded across all administrative units of the Klos municipality. The municipality of Klos has prepared the Local Social Plan, which was approved by the municipal council on November 30, 2023, for the period 2024-2027. Currently, the plan has not been published because it is awaiting approval from the prefecture. This is a critical moment for some of the key recommendations and findings to be incorporated into the plan.

During the social mapping for people with disabilities near the municipality of Klos, various problems were identified in multiple aspects. These issues require intervention from the local government as well as other public institutions and/or donors, particularly for planning the establishment of a daycare center as soon as possible. This center will provide appropriate services for the citizens of Klos who fall into this category.

There is a lack of infrastructure for these individuals in almost all institutions, whether they are schools or health centers.



Picture 1: School Bershi, Klos



Picture 2. Health Center A.U. Suç, Klos



Picture 3. Health Center, A.U. Gurrë Klos



Picture 4. School, A.U Suç, Klos

The map of Public Institutions, Schools, and Health Centres at Klos Municipality can be found by [clicking here!](#)

5.2. LNOB Group – Children with Disabilities

5.2.1 Demography and Socio-Economic Status

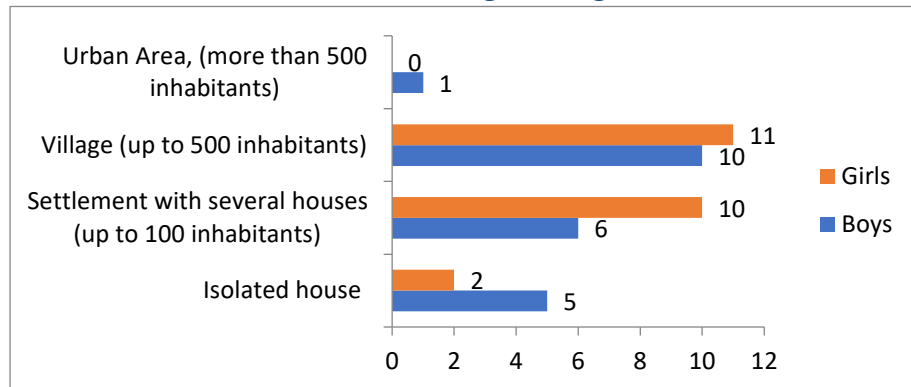
Cross data provide information on the gender of children distributed according to their place of residence in the Municipality of Klos. The graph below breaks down the data into different living environments and compares the number and percentage of male and female children within these environments.

- 7 children (5 boys and 2 girls) live in isolated houses, far from other houses.
- 16 children (6 boys and 10 girls) live in residential areas with several houses (up to 100 inhabitants).
- 21 children (10 boys and 11 girls) live in villages with up to 500 inhabitants.
- In urban areas (inhabited by more than 500 inhabitants), it is reported that only 1 child lives, who is a boy.



Combining all categories of residences, the number interviewed was 45 children, consisting of 22 boys (48.9%) and 23 girls (51.1%). These figures illustrate the overall balance between male and female children in different types of residential areas. The most common age group among children with disabilities is 10 to 15 years old.

Chart 1. Place of residence according to the gender of the child

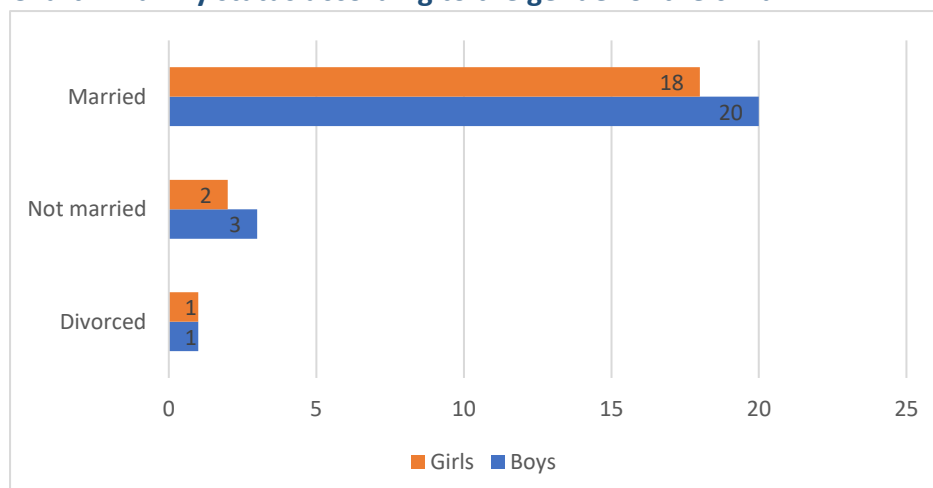


Graph 2 presents the relationship between the family status of the caregiver/parent and the gender of a child. The analysis was also done according to the marital status of their guardians or parents.

- There are 38 children with married guardians or parents, of whom 18 are boys and 20 are girls.
- There are 5 children (3 boys and 2 girls) with unmarried guardians/parents.
- Divorced guardians/parents: As for children of divorced guardians or parents, the number is divided equally with 1 male child and 1 female child, each representing 50% of the total for this group. Since the total number is only 2, it is difficult to draw any meaningful conclusions from this statistic.

Looking at the entire sample, there is roughly a balance between male and female children, with 22 males (48.9%) and 23 females (51.1%) out of a total of 45 families with children with disabilities surveyed. The small differences within each marital status category could be influenced by multiple factors and would require a larger data set to analyze for any significant patterns or trends.

Chart 2. Family status according to the gender of the child



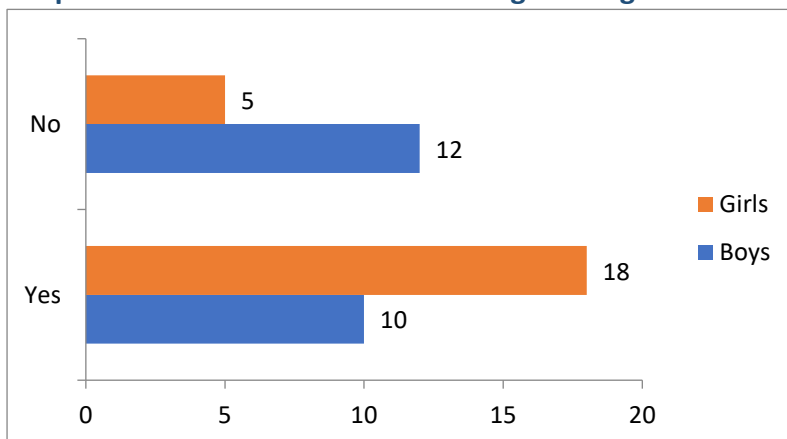
The relationship between the economic status of caregivers and the gender of the children they are responsible for is analyzed below. The children of pensioners and those whose guardians/parents are close to retirement or refuse to answer about their economic situation are all female. Meanwhile, caregivers receiving social assistance have mostly male children, with a breakdown of 65% boys and 35% girls. The gender distribution is more balanced between those who exercise the right to financial assistance from social protection and those who are employed, with a slightly higher number of female children in the first group and more male children in the second group.

Chart 3. Economic status according to the gender of the child



Among the respondents who had income in the previous month, there were 38 in total (with 22 boys and 16 girls). This shows a higher percentage of families with male children than those with female children who had income during the past month. Unfortunately, there were 7 parents/guardians surveyed, who report that they had no income in the past month. There is a tendency for families with disabled male children to not have income compared to families with female children.

Graph 4. Last month income according to the gender of the child



Below is an analysis of what the income base was for those parent/guardian respondents who claimed to have received an income in the past month, based on the gender of the child.

- 13 parents/guardians (9 boys and 4 girls) had received income from social assistance.

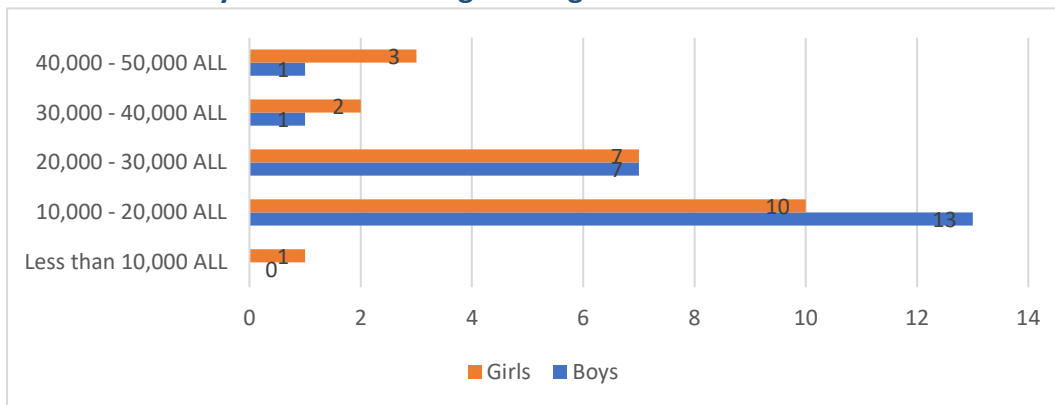


- 13 others (6 boys and 7 girls) said they had income from work.
- Regarding the respondents who confirmed that their income came from a pension, there are a total of 10 caregivers/parents with 7 sons and 3 daughters. There were more families with male children than with female children who had pension-based income.
- Only one parent/guardian with a girl child with disabilities in the group of respondents confirmed that the income in their family came from unemployment compensation.
- Also, one parent/guardian with a disabled girl child in the group of respondents refused to say where their income came from.

The figure below shows the monthly income from the last year according to the gender of the child:

- In the lowest income category (less than ALL 10,000), only one child is listed and that child is a girl.
- Most of the respondents with boys (13) and 10 with girls say that their income ranges from 10,000 - 20,000 ALL.
- 7 parents/guardians of boys and 7 of girls say that their income varies between 20,000 - 30,000 ALL.
- The parents/guardians of 2 girls and 1 boy claim to receive income between 30,000-40,000 ALL. While ALL 40,000 - 50,000 are received by the parents/guardians of 3 girls and 1 boy.

Chart 5. Monthly income according to the gender of the child

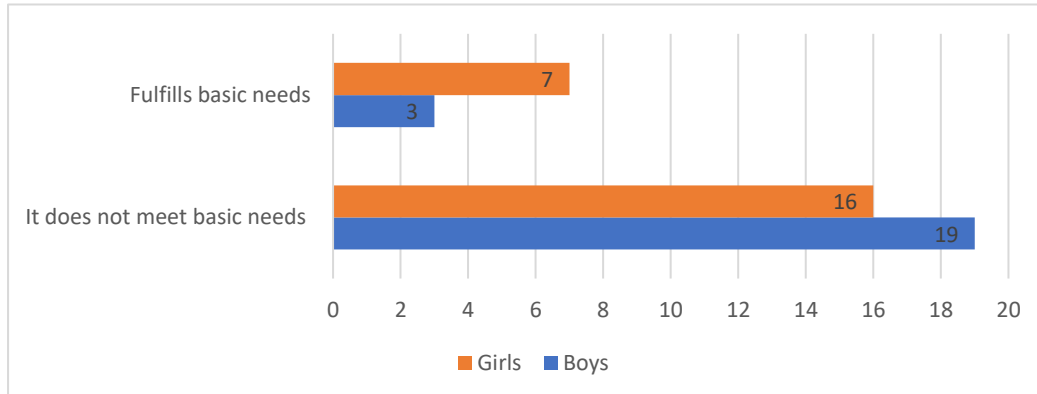


Next, the graph below presents the assessment that parents/guardians themselves give regarding their income and the fulfillment of basic needs, combined with the gender of their children.

- There is a total of 10 families who believe that their budget meets their needs (3 boys and 7 girls). This shows that in the perception of those respondents whose children with disabilities are girls, their budget meets basic needs.
- In contrast, there is a larger number of families who feel that their budget does not meet basic needs, 35 in total (19 boys and 16 girls), suggesting that parents/guardians of male children are more prevalent among families reporting that their budget does not meet basic needs.

The data suggest a gender-related difference in the perceived adequacy of the household budget. In families that consider their budget sufficient for basic needs, female children are reported at a higher rate. Conversely, there is a slightly higher presence of male children in families that report their budget as insufficient.

Chart 6. Assessment of income sufficiency according to the gender of the child

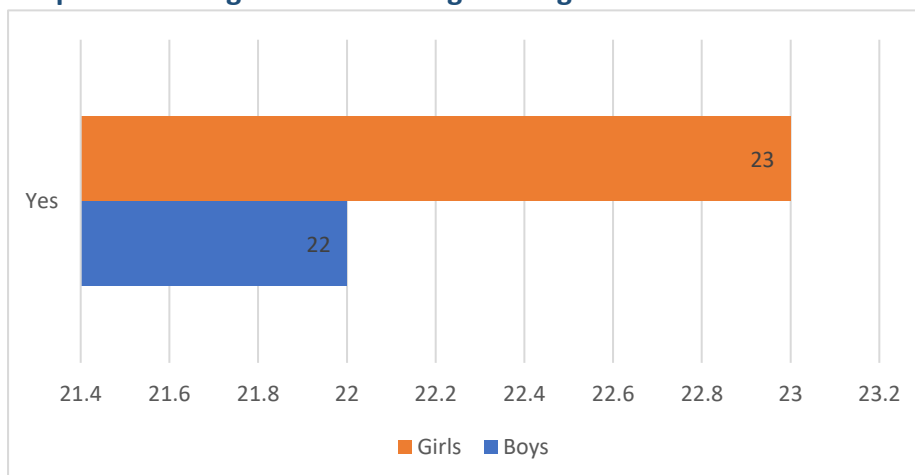


The analysis below shows where parents of children with disabilities receive financial support:

- Spouse: 25 parents/guardians (13 boys and 12 girls)
- Siblings: 6 parents/guardians (3 boys and 3 girls)
- Support from the state: 15 parents/guardians (5 boys and 10 girls)

The graph below shows the data on the sufficiency of drinking water in the homes of children with disabilities according to the respondents, where all claim that they have drinking water in their homes.

Graph 7. Drinking water according to the gender of the child



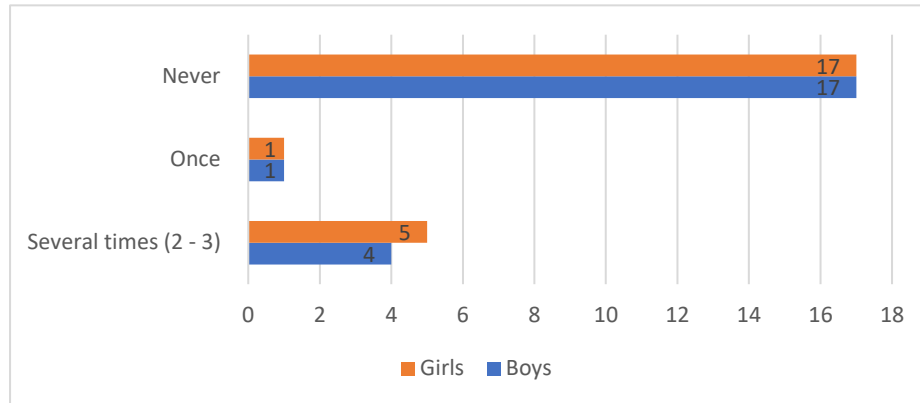
Below is an analysis of food insufficiency during the last month, analyzed by gender of children.

- An equal number of boys and girls (17 each) never experienced food insufficiency.
- For the category of experiencing food insufficiency once, there are responses from the families of one boy and one girl.

- In the group that has experienced food insufficiency several times (2-3 times), there are 4 parents/guardians of male children and 5 parents/guardians of female children.

In general, food insufficiency affects boys and girls almost equally. However, when food insufficiency occurred multiple times, slightly more was reported for female children.

Graph 8. Lack of food according to the gender of the child



The following analyzes whether households have a computer or similar devices such as laptops or tablets and breaks down responses by gender of children.

- There are a total of 11 families (4 boys and 7 girls) that have a computer or similar device.
- In contrast, in families without such devices, the number is higher, with a total of 34 (18 boys and 16 girls).

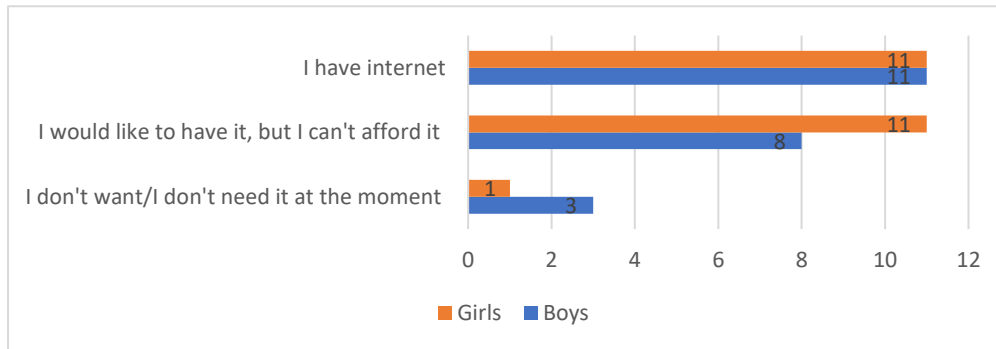
Overall, the data suggest that while more families reported not having a computer or similar device, among those who do, there is a higher trend in those families where the children with disabilities are girls.

The graph below shows internet access in the family and its relationship with the gender of the children. The analysis shows the following:

- For those who wish to have Internet but cannot afford it, there are more families with female children (11) than families with male children (8).
- In the category of families that do not want or currently need the Internet, the majority have boys (3) rather than girls (1).
- There are 22 families, 11 with boys and 11 with girls, who state that they have Internet access at home.

This suggests that internet access is equally present in both genders, but there is a marked gender difference among those who cannot afford internet access, with a higher proportion of girl children in these households. Conversely, there is a greater percentage of male children in families that have no immediate need or desire for the Internet.

Graph 9. Internet access in the family according to the gender of the child



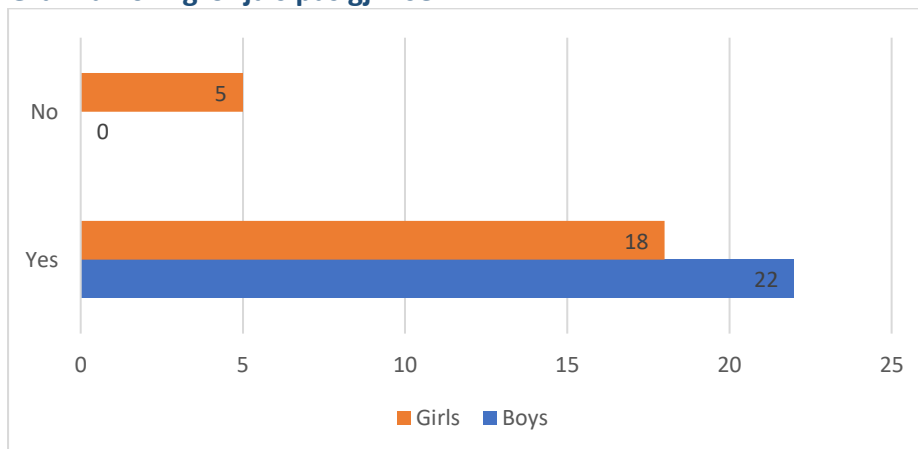
The analysis below shows households equipped with televisions with age-appropriate television channels for children. Thus, according to the analysis:

- 39 families have suitable channels, with an almost equal distribution: 20 with male children and 19 with female children.
- 5 families (3 with girls and 2 with boys) want to have such channels but do not have the means.
- In one case, a girl child's family does not want or need them.

This shows that most of the surveyed households have television channels suitable for children, with a balanced gender distribution. A small majority of girls' families cannot access these channels.

The data presented in the graph show that, of the surveyed families, those that can afford adequate heating are in a slightly higher percentage families of male children (22) compared to female children (18). Conversely, in the smaller subgroup of households that cannot afford heating, all have female children, suggesting a gender-based disparity in living conditions related to heating options. This also shows the limited economic opportunities of families with female children with disabilities, which may be influenced by other unexamined factors.

Grafiku 10. Ngrohja sipas gjinisë



Next, families of children with disabilities were also asked about the possibility of affording a one-week vacation away from home in relation to the gender of their children.



- Only one family of a boy can afford such expenses.
- The largest group, consisting of 44 children, cannot afford the vacations, with a distribution of 21 families with boys and 23 with girls.

This indicates that a slightly higher percentage of families of female children report that they are unable to afford a one-week vacation away from home. Overall, the sample points to a possible economic constraint affecting more families with female children, although the data are limited and may not reflect broader socio-economic impacts.

The analysis below explores the affordability of meat or its vegetarian equivalent for families, in relation to the gender of their children, finding that an equal number of families for each gender (6 boys and 6 girls) can afford food expenses that allow them to consume meat or its by-products.

Slightly more families with boys (16) than girls (15) cannot afford meat or its by-products. The families of two girls refused to answer or did not know.

Overall, while there is a balanced situation for families who can afford these foods, there is a slight gender disparity among those who cannot, favoring families with male children.

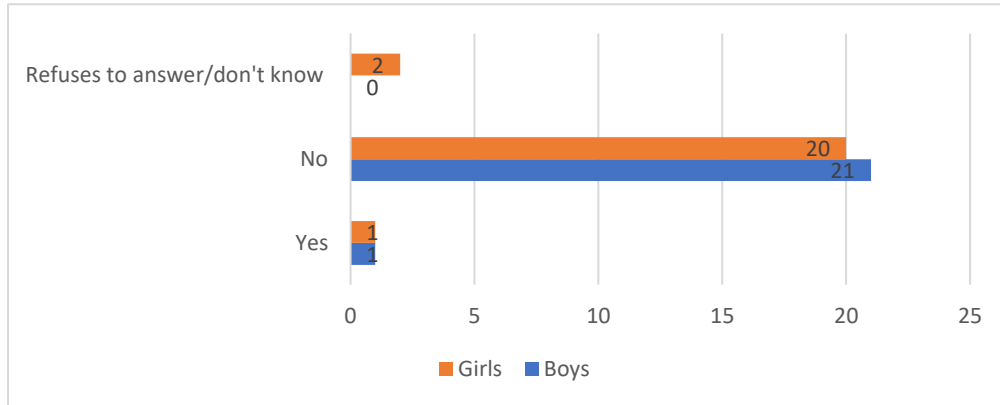
Parents of children with disabilities were also asked if they could afford to hire someone to care for their children while they might be at work or when they could not. In the surveyed group, the distribution is almost even, with 22 families with male children and 23 families with female children reporting that they cannot afford to hire someone to look after their child.

The graph below shows whether families can afford unexpected or necessary expenses ranging from 300 to 500 euros, broken down by gender of their children.

- There are only 2 families (1 boy and 1 girl) who can manage these expenses.
- For those who cannot afford these expenses, the numbers are also almost evenly distributed, with 21 families with male children and 20 with female children.

Two families of female children did not respond or did not know what to say. This suggests that most families of both boys and girls do not have the financial means for unexpected expenses.

Graph 11. Unexpected expenses of 300-500 euros according to the gender of the child



The question related to the ability to afford the costs of purchasing medicines for oneself or for the child is analyzed below.

The responses show that:

- Only 10 families of boys and 9 of girls can afford to buy medicines.
- Meanwhile, 12 families of boys and the same number of families of girls cannot afford the expenses for medicine.
- Two families with daughters refuse to answer or do not know.

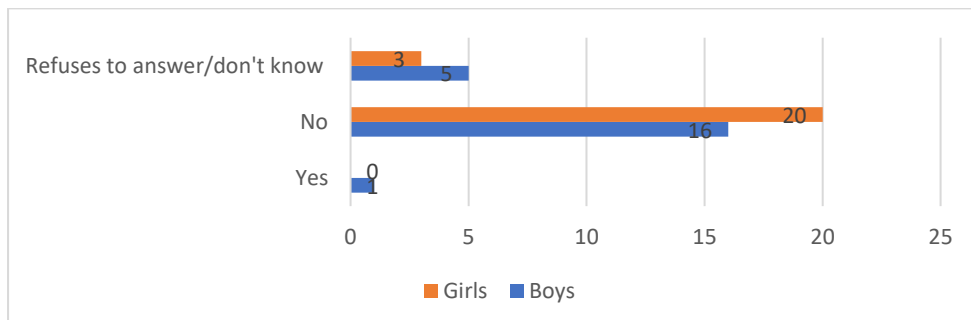
The data below includes responses from two groups divided by gender, to a question related to their ability to afford loans, rent, bills and other expenses.

The answers are as follows:

- The family of a boy replied that they can cover these expenses.
- Most of the families of boys (16) and girls (20) answered that they cannot afford these types of expenses.
- 8 families do not know or refuse to answer.

This indicates significant financial limitations among the surveyed families, especially those of girls with disabilities.

Graph 12. The ability to afford the expenses for loans or rent according to the gender of the child



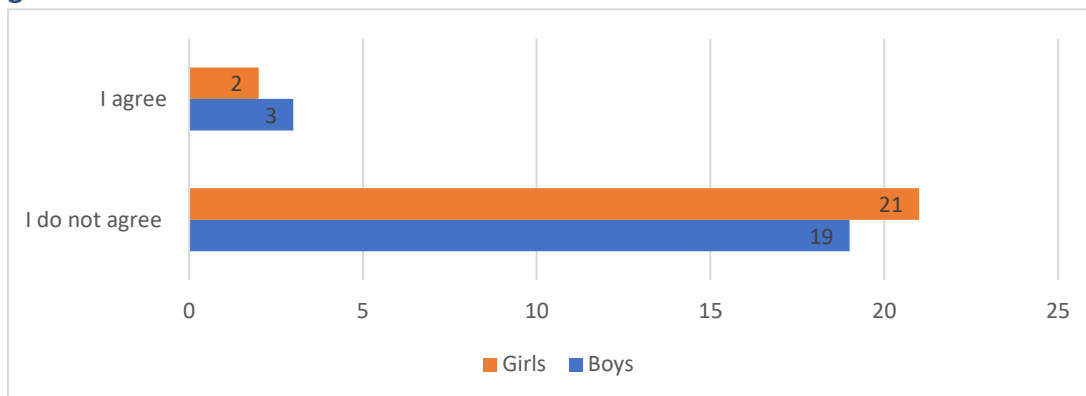
The data in the figure below shows the level of respondents' satisfaction regarding their economy or financial resources. The answers show that:



- Only a small number of respondents, namely the families of 3 boys and 2 girls, have expressed that they agree and have everything they need.
- But the vast majority of families (19 boys and 21 girls) disagree with the statement, suggesting that they feel they don't have everything they need.

This indicates a general feeling of not being satisfied or having enough money among the surveyed participants.

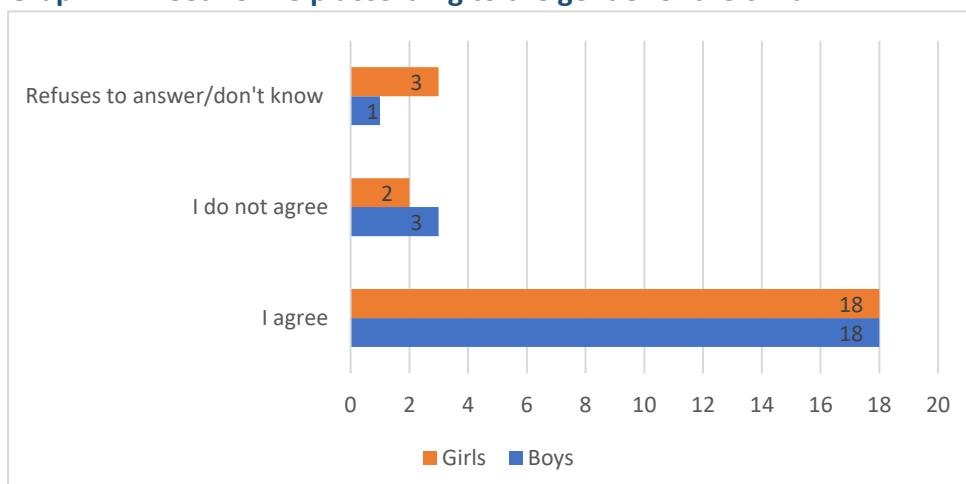
Chart 13. Satisfaction with the financial ability to afford the expenses according to the gender of the child



During this survey, parents of children with disabilities were also asked about their agreement or disagreement with some other details, which are reflected as follows:

- **Good living conditions:** 30 families (15 with boys and 15 with girls) had good living conditions, compared to another 15 families (8 boys and 7 girls) who did not have good living conditions for their children.
- **Need for help and specialized care:** 36 families (18 with boys and 18 with girls) report that they need help and specialized care. A low percentage, with 3 families of boys and 2 girls, do not need these services, while 4 families (3 girls and 1 boy) refused to give an answer.

Graph 14. Need for help according to the gender of the child



Next, participants were asked about financial challenges related to paying water, electricity and telephone bills in the past 12 months and how these challenges have affected their lives.

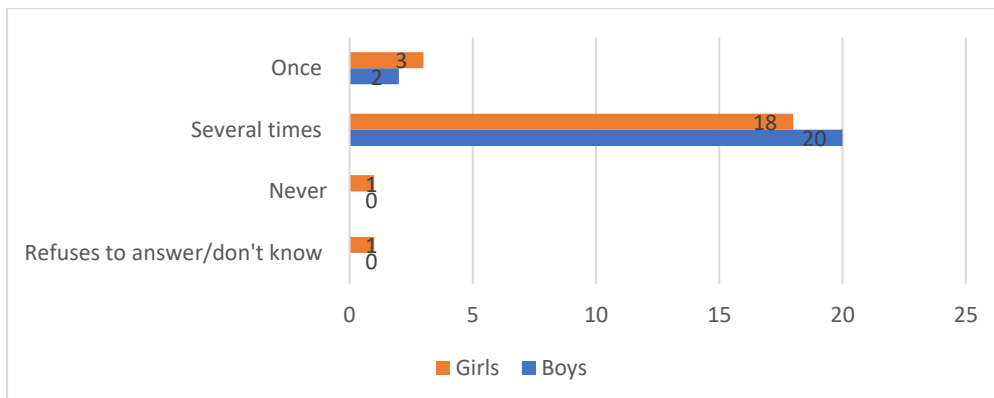
- 25 families (with 12 boys and 13 girls) have said that they have had difficulties several times for various payments such as water, electricity and telephone bills.
- 11 families (6 boys and 5 girls) had difficulties only once
- 9 families (4 boys and 5 girls) have never had difficulties

The figure below shows whether respondents have encountered financial challenges related to home repairs in the past 12 months.

- 5 families (2 with boys and 3 with girls) said that they have faced these challenges only once.
- Most of the families, 38 in total (20 with boys and 18 with girls) faced such challenges several times.
- 1 family with a daughter said that they have never faced financial challenges for home repairs.
- 1 family with a daughter chose not to answer.

These data show that the majority of respondents have encountered frequent financial challenges related to the need for home repairs, which can be a heavy economic burden for them.

Graph 15. Challenges related to expenses for home repairs according to the gender of the child



5.2.2 Geography – risk factor

Families of children with disabilities were also asked about their type of residence:

- Only one family with 1 girl reports living in an apartment in a residential building in relatively good condition.
- A family with 1 boy lives in an apartment in a residential building in poor conditions; no girls report being in this situation.
- 4 families with 4 boys live in an apartment.



- 7 families (3 boys and 4 girls) live in a house in relatively good condition.
- 19 families (with 11 boys and 8 girls) live in old houses in poor conditions.
- 10 families (with 3 boys and 7 girls) live in apartments designed for living with basic conditions such as electricity, water, toilet, telephone, etc.
- 3 families with girls report that they live in a place without suitable living conditions.

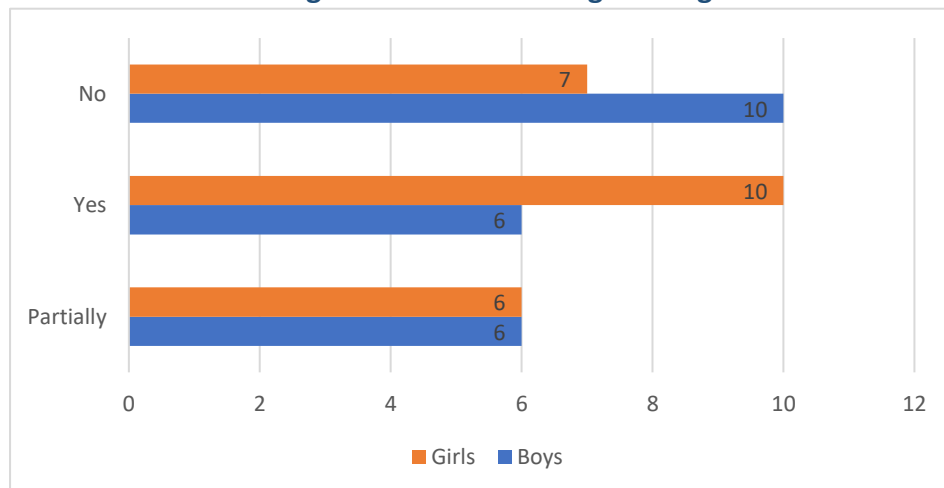
This reflects a clear division of residence types among the participants, with a greater number of boys reporting living in old houses in poor conditions, while a greater proportion of girls live in apartments with basic conditions and some in buildings without adequate living conditions.

Following this, the families generally report that:

- 16 have good living conditions.
- 17 do not have good living conditions.
- 12 think that they partially have good conditions in their homes.

Also, 30 families (with 16 boys and 14 girls) report that they are the owners of the apartment where they live together with the disabled child. 3 families live in relatives' houses but not with them, 1 family reports that they received their place of residence from a charity, 7 families report that they live in a house that they built without permission. 2 families live in a residence shared with others and 2 families refuse to answer.

Chart 16. Good housing conditions according to the gender of the child



Regarding the floor where they live, families of children with disabilities responded as follows:

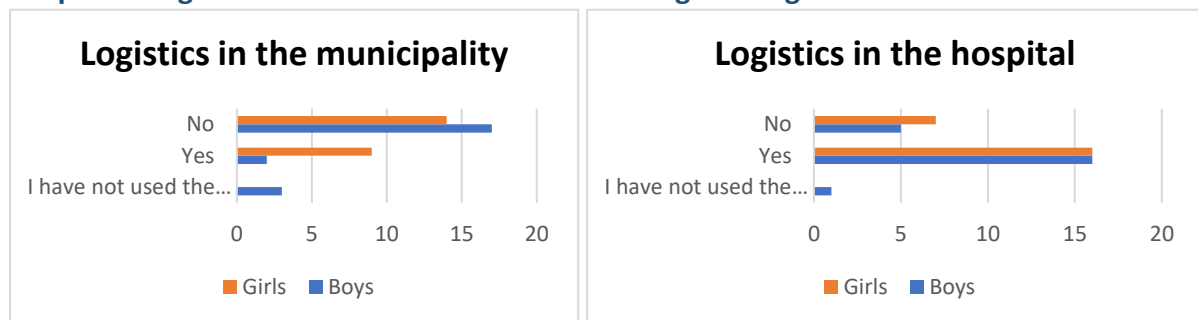
- 8 families (4 boys and 4 girls) live on the ground floor.
- 31 families (14 with boys and 17 with girls) live on the first floor.
- 5 families (3 boys and 2 girls) live on the second floor.
- Only 1 family with one boy lives on the third floor or higher; no girls have reported living on this floor.

These data show a clear preference for living on the ground and first floors among the surveyed participants, with a smaller percentage living on higher floors, due to the child's disability and the lack of elevators, because only 1 family of a girl reports that their apartment has an elevator. While 4 families (with 1 boy and 3 girls) report that their apartments have ramps, which create mobility access for wheelchairs.

Regarding the question of proper accessibility for people with disabilities (ramps, elevators, special entrances, etc.) in some institutions, the answers are listed as follows:

- 31 families (17 boys and 14 girls) say that they do not have the necessary access to the municipality building, against 11 (2 boys and 9 girls) who say yes and 3 who have never used it.
- 13 families (6 boys and 7 girls) say they do not have the necessary access to the courthouse, compared to 27 families who say they have never used it.
- 32 families (16 boys and 16 girls) say that hospitals have accessibility for people with disabilities, against 12 families (5 boys and 7 girls) who say they don't.

Graph 17. Logistical access to institutions according to the gender of the child



5.2.3 Needs assessment for children with disabilities

Parents/guardians of children with disabilities were also asked about their children's needs for examinations based on health status (health services).

Asked if they had needed a general medical examination (blood test, urine test, etc.) and if they had received that service in the last 12 months, respondents answered as follows:

- 34 families (16 boys and 18 girls) indicated that they had needed and received these services.
- 10 families (5 boys and 5 girls) said they needed these services but did not receive them
- Others said they did not need to receive such services

Asked if they had needed a specialized examination (dental, eye, gynecological, etc.) and if they had received that service in the last 12 months, the respondents answered:

- 11 families (4 boys and 7 girls) said that they had no need.



- 18 families (11 boys and 7 girls) said that they needed this type of service and had their children examined.
- 13 families (7 boys and 6 girls) said that they had needed it several times but did not receive the service.

Others said that they had no need to receive such services and according to the respondents, the distances to receive various health services are as follows:

Ambulance:

- Less than 2 km away for 24 families (10 boys and 14 girls)
- More than 2 km away for 21 families (12 boys and 9 girls)

Hospital:

- Less than 2 km away for 9 families (6 boys and 3 girls)
- More than 2 km away for 36 families (16 boys and 20 girls)

Private Clinic:

- Less than 2 km away for 4 families (2 boys and 2 girls)
- More than 2 km away for 29 families (15 boys and 14 girls)
- There are no private clinics for 10 families (5 boys and 5 girls)

Center for children with disabilities

- More than 2 km away for 10 families (6 boys and 4 girls)
- There is no center for children with disabilities for 29 families (15 boys and 14 girls)

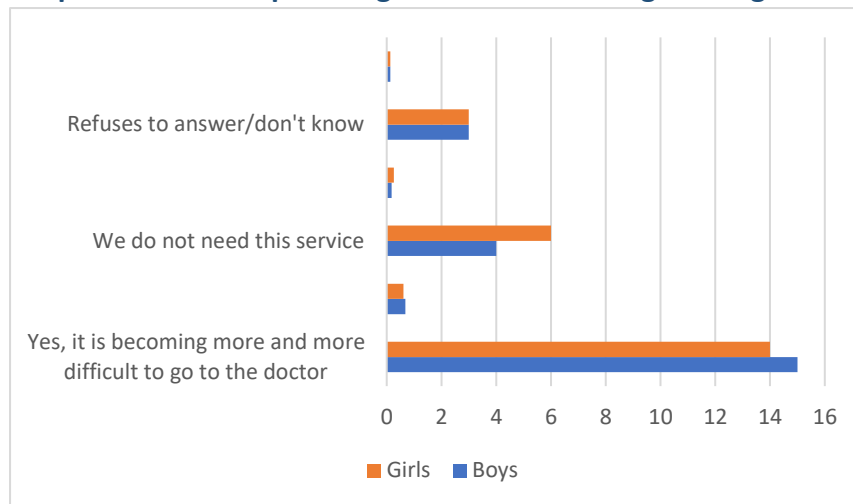
According to the survey, it turns out that in the health institutions or in the territory of the municipality of Klos there are no dentists; physiotherapy services; optometrists, there is also no day center for children with disabilities or a center for children with Down syndrome.

Parents/guardians of children with disabilities were also asked if they had received patronage services from medical personnel. The responses show that 32 children (18 boys and 14 girls) are not informed about this service. 2 families (1 with a boy and 1 with a girl) admit that they have received this patronage service from the medical staff, while 10 families (3 boys and 7 girls) report that they have never received such patronage services.

Next, when the interviewees were asked if they needed the service of patronage (e.g. a person visiting the child at home), 29 families of which 15 with boys and 14 with girls informed that they needed this type of service as it was becoming more and more difficult for them to go to the doctor. Meanwhile, 10 families (4 boys and 6 girls) thought that they did not need this service.

The gender analysis shows that there are more families with girls with disabilities who need patronage services from medical staff in the home.

Graph 18. Need for patronage services according to the gender of the child



When asked if they received all the necessary health services for their children, the results show that:

- 31 families (17 with sons and 14 with daughters) do not receive these services.
- 13 families (5 with boys and 8 with girls) receive the necessary services.
- 1 of the respondents refused to answer or did not know how to answer.

Regarding the lack of services and their identification, from the analysis of the given data, we can highlight the following findings:

- **Doctors of various specializations:** This is the most requested service, from 15 families (with 9 girls and 6 boys) who mentioned it as a lack.
- **Speech therapist:** This is the second service mentioned by 5 families with disabled sons.
- **I have not encountered difficulties:** 8 families (3 boys and 5 girls)
- **Ophthalmologists, Surgery for the child, Transport:** Only one family that has a daughter with disabilities needs these 3 services.
- **Specific Center for People with Down Syndrome:** This was mentioned by only one family.
- **Physiotherapy training, free centers with specialized services for the disabled:** 6 families (4 boys and 2 girls) need this.
- **Medical visit, transport:** This was mentioned by two families with boys (9.1%) and one with a girl (4.3%).

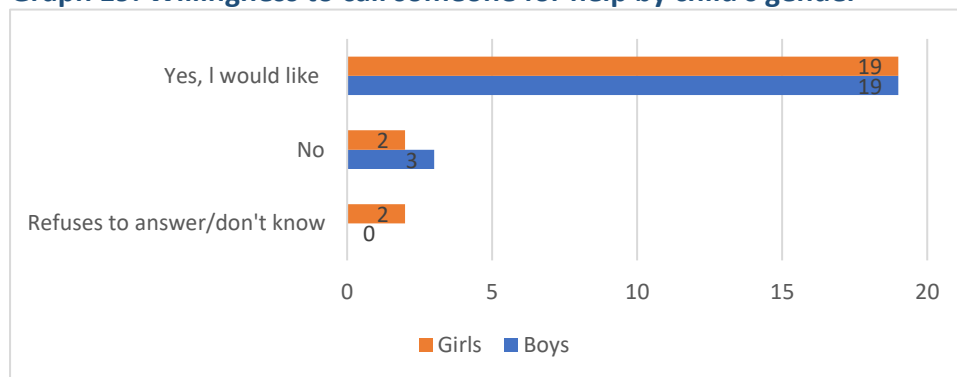
In general, families with female children with disabilities reported more lack of services compared to families with male children. The services that are missing the most are medical and specialized ones, as well as training centers and specific services.

Next, the parents/guardians of children with disabilities were also asked about the need for equipment or assistance that could make life easier for the child. The analysis of the data shows that:

- There are 12 families (with 8 boys and 4 girls) who would need a "smart" monitor to measure blood pressure and pulse or to notify them about the exact time of taking medicines.
- 6 families of girls with disabilities need a toilet for wheelchairs.
- 8 families (2 with boys and 6 with girls with disabilities) need wheelchairs.
- There are 12 families that need waterproof chairs or shower seats, of which 3 families have boys and 9 have girls.
- 10 families need a personal system for emergency calls to health services, of which 4 are families with sons and 6 with daughters with disabilities.
- 8 families (divided equally by child's gender) need to have magnifying glasses for reading.

Parents/guardians of children with disabilities were also asked if they would like to be able to call someone to help them with various activities and the majority of responses from both genders are positive. 38 families (19 with boys and 19 with girls) would like this opportunity. This indicates a clear need for assistance in performing certain activities. Only a small number of answers are negative for 5 families (3 with boys and 2 with girls) who said they would not like to have this opportunity. 2 families with girls do not know or refuse to answer.

Graph 19. Willingness to call someone for help by child's gender



Following the analysis, the interviewees of this target group were invited to rate some aspects of their lives regarding children with disabilities, on a scale from 1 to 5, where 1 is the lowest rating and 5 is the highest.

Satisfaction with interpersonal relationships with other people:

- **Rating 1 (very dissatisfied):** The highest percentage of dissatisfaction is among families with male children with 5 respondents, while only 2 families with female children gave this rating.
- **Rating 2 (dissatisfied):** 4 families with male children and 5 families with female children gave this rating.



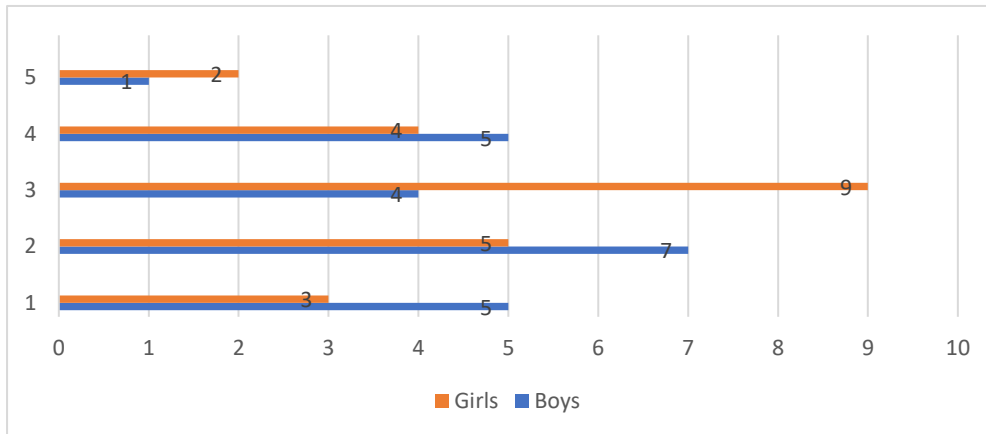
- **Rating 3 (neutral):** It is the most frequently used, with 7 families with sons and 8 families with daughters feeling neutral about their personal relationships.
- **Rating 4 and 5 (somewhat satisfied and very satisfied):** This includes 6 males and 8 females.

Satisfaction with health services:

- **Rating 1 (very dissatisfied):** 5 families with sons and 3 with daughters gave the lowest rating, indicating a marked dissatisfaction with local health services.
- **Rating 2 (dissatisfied):** 7 families with sons and 5 with daughters are slightly dissatisfied with the services, which suggests that there are others who are not completely satisfied.
- **Rating 3 (neutral):** 4 families with sons and 9 with daughters are neutral about this issue, expressing neither satisfaction, nor dissatisfaction.
- **Rating 4 (somewhat satisfied):** 5 families with sons and 4 with daughters are more positive, but not completely satisfied.
- **Rating 5 (very satisfied):** Only 1 family with a boy and 2 with girls are very satisfied with local health services.

Overall, the data shows that there is a tendency of dissatisfaction with local health services, especially among families of boys, although there is a small number of very satisfied individuals. This may indicate the need for improvements in the quality of health services in this area.

Chart 20. Satisfaction with health services according to the gender of the child



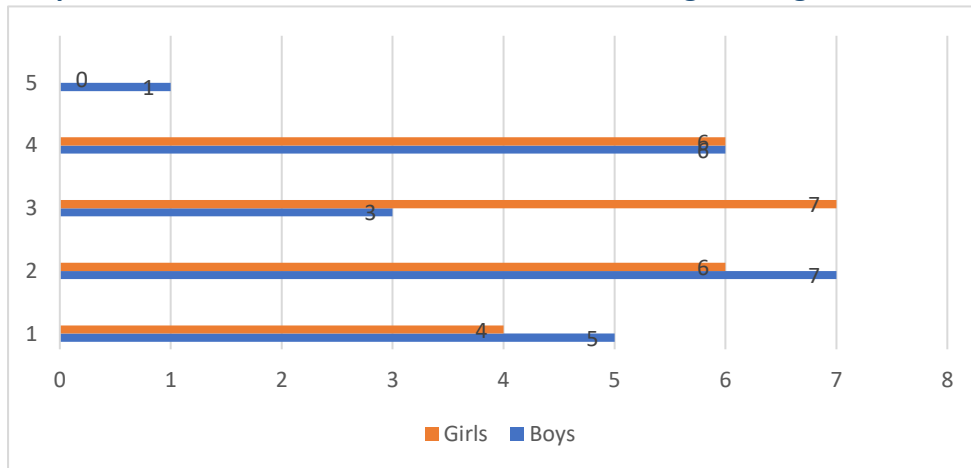
Satisfaction with social services:

- **Rating 1 (very dissatisfied):** 5 families with boys and 4 with girls gave the lowest rating, indicating a marked dissatisfaction with the social service.
- **Rating 2 (somewhat dissatisfied):** A similar number, 7 families with boys and 6 with girls, are also not much satisfied with the social service.
- **Rating 3 (neutral):** 3 families with boys and 7 with girls are neutral on this issue, standing in the middle of the rating range.
- **Rating 4 (somewhat satisfied):** There is a tie in this category, with 6 individuals of both genders being slightly more satisfied.

- **Rating 5 (very satisfied):** Only 1 family with a boy with a disability expressed high satisfaction with the social service, while no family with a girl with a disability rated the social service with the highest grade.

In general, the data shows a tendency towards dissatisfaction with the social service at the local level, especially in rating categories 1 and 2. This may mean that there is room for improvement in this sector.

Graph 21. Satisfaction with social services according to the gender of the child



The feeling of abandonment by the community (where 1 very abandoned and 5 very supported):

- **Rating 1 (feel very abandoned):** 5 families with boys and 2 with girls feel abandoned at the highest level.
- **Rating 2 (feel a little abandoned):** 7 families with boys and 8 with girls feel abandoned at a low level.
- **Rating 3 (neutral):** 5 families with boys and 7 with girls are neutral regarding their feelings of abandonment by the community.
- **Rating 4 (feel a little supported):** 2 families with boys and 4 with girls feel some degree of support from the community.
- **Rating 5 (feel very supported):** 3 families with boys and 2 with girls feel strong support from the community.

These data suggest that there is a distribution of feelings of abandonment across the spectrum, with a greater number of families feeling abandoned to some degree (ratings 1 and 2) compared to those feeling supported (ratings 4 and 5). In both genders, the neutral rating of 3 receives a significant percentage of responses, indicating an ambivalent feeling towards the community.

5.2.4 Assessment of Home Service Needs in the local community

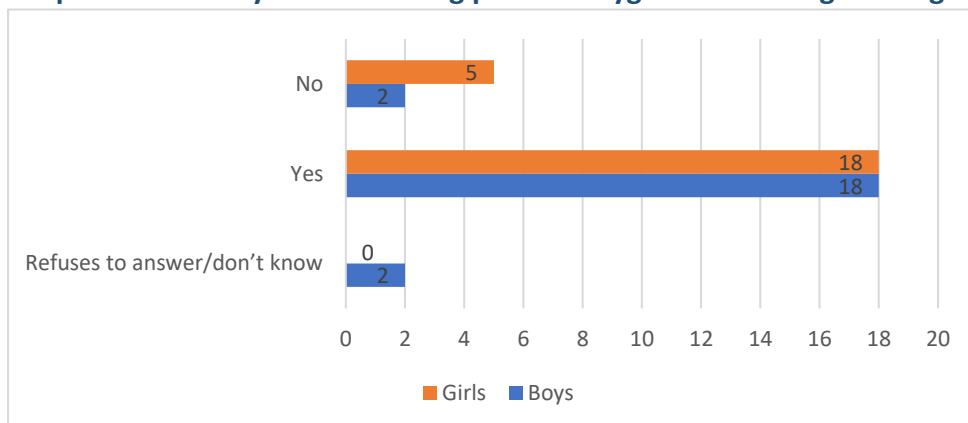
Parents and guardians of children with disabilities were also asked about the need for services at home for their children, thus assessing the situation.

Below is a detailed analysis according to the respective questions.

- The need for a hearing aid, was expressed by 7 parents, of whom 5 families with boys and 2 families with girls with disabilities.

- 10 children with disabilities need mobility assistance (e.g. crutches), of whom 2 are boys and 8 are girls.
- 10 girls and 4 boys with disabilities need wheelchairs.
- 33 parents or guardians of children with disabilities expressed the need for service from other people, of which 16 families with boys and 17 families with girls with disabilities.
- A large number, 36 children, equally divided between the genders, express the need for help in maintaining personal hygiene.
- 37 of them need someone to prepare their meals (17 boys and 20 girls).
- 33 children have more difficulties in feeding themselves, of whom 16 are boys and 17 are girls.
- 24 children (10 boys and 14 girls) have difficulty moving inside the house and 35 (16 boys and 19 girls) have difficulty moving outside the house.
- 33 children (15 boys and 18 girls with disabilities) have more difficulties than other children in using school facilities and spaces and 34 of them (14 boys and 20 girls) have difficulties in using public transport.

Graph 22. Difficulty in maintaining personal hygiene according to the gender of the child



Parents/caregivers of children with disabilities were also asked who helped their children the most in daily activities, and the analysis of the data shows that it is the parents who are most involved in 46.7% of cases, or divided by gender, 9 parents of boys and 12 of girls have confirmed this option. Followed by 26.7% of them (7 for boys and 5 for girls) who state that it is the mother who takes care of children with disabilities and 22.2% of cases (4 boys and 6 girls) report that it is the whole family who takes care for their disabled child. The father and the sister were reported from only 2 cases with male children.

In a comprehensive study analyzing different places where children usually go, accompanied by their parents/guardians, some key locations were examined. These places include doctors' offices, social centers, public parks, schools or care centers, hospitals, pharmacies, banks, and stores.



- When it comes to visits to the doctor's office, only 4 families of these children (2 boys and 2 girls) reported walking, while 22 traveled by car, equally divided by gender. Also, 18 parents/caregivers of children with disabilities (without gender differences) used public transport, while only one family with a daughter with disabilities was taken to these meetings by someone else's car.
- Regarding visits to social centers, 22 families of which 12 with sons and 8 with daughters with disabilities reported that they did not go to such centers. 9 used public transport (4 with boys and 5 with girls with disabilities); 7 by car, of which 5 with boys and 2 with girls with disabilities; 5 families in total (all with girls) informed that other people escorted them to such centers.
- In the context of public parks and recreational spaces, the results show that there are 29 families, of which 13 with sons and 16 with daughters with disabilities, who did not frequent these spaces at all. Whereas, 1 family with a disabled daughter walked; 4 families (3 with boys and 1 with a girl) used the car; 4 families with boys and 2 families with girls used public transport and 4 others (with no difference in gender distribution) were accompanied by others.
- For going to school or day care centers, the modes of transport are different, with walking (8 families, of which 5 with boys and 3 with girls), car (7 families, of which 3 with boys and 4 with girls), public transport (11 families, of which 5 with boys and 6 with girls); being escorted by others (3 families with girls) constitute the main means of travel. While some respondents (2 families with girls) either refused to answer or were unsure. However, there are about 14 families (9 with boys and 5 families with girls) who do not visit these places.

The study also looked at the average time it takes children with disabilities accompanied by parents/guardians to reach various destinations, including doctor's offices, hospitals, pharmacies, banks and stores. The responses received range from 8 minutes to 99 minutes, depending on the mode of transport and distance traveled. Overall, the findings provide information on transportation preferences and travel times among children with disabilities, highlighting the importance of accessibility and logistics in accessing essential services and amenities.

In the analysis of the use of various services during the last 12 months, divided according to children's gender, some important trends emerge.

- **Social Worker Services:** Among families with boys with disabilities, 14 reported using these services, as did 11 families with girls who used these services.
- **Help at home (for daily activities):** The use of these services does not differ between genders. Only 4 families with boys and 3 with girls used them. There are 38 families (18 with boys and 20 with girls with disabilities) who do not have any help at home for daily activities.
- **Personal help for your child (outside the home):** In this category, 4 of the families with boys and 2 of the families with girls with disabilities reported using such services. However, there are 38 families (17 with boys and 21 with girls) who have never used this service.



- **Moral support or counseling:** There is no major difference between families with boys and those with girls on this point. 5 families with boys and 6 families with girls have used this service, while there are 26 other families (14 with boys and 12 with girls) who have never used such a service.

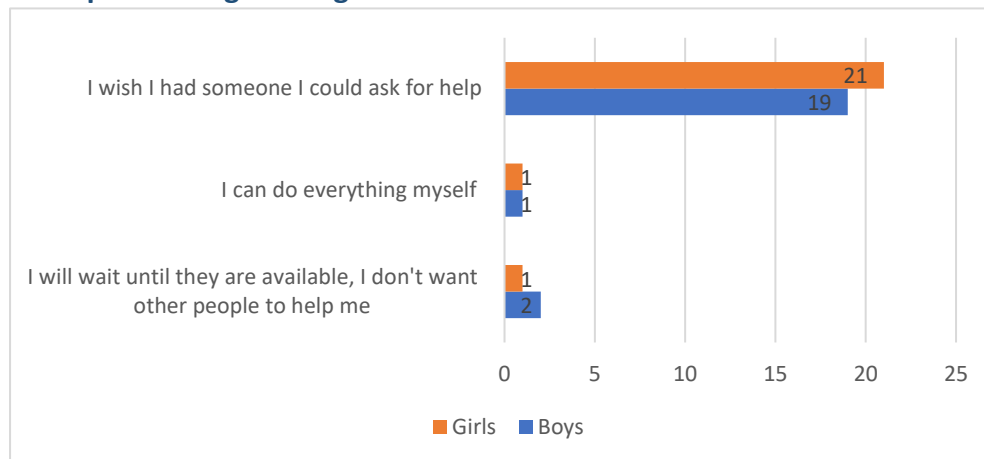
Regarding the question of whether individuals have someone to talk to about their problems, especially in their current situation, there are notable gender differences in different relationships.

- 75.6% of respondents or 34 of the total number of people interviewed indicated that they have someone to talk to within the family. Parents of girls held a higher level in this regard, with 20 in total, while parents of boys who had someone they could talk to were 14.
- A distribution with a slight difference between the genders (11 parents of girls and 8 of boys with disabilities) have someone to talk to among relatives.
- Only 13.3% of respondents have someone to talk to among neighbors and friends. 4 are the families of girls and 2 are those of boys with disabilities who reported that they have someone among neighbors or friends with whom they can talk.
- Approximately 11% of respondents have someone to talk to through Social Centers. 5 are parents of boys and only 1 family of girls with disabilities chose this option.
- Only 6.7% (3 boys' families) of respondents have someone to talk to through the Red Cross
- Only 4.4% of the respondents have someone to talk to in Religious Institutions or other Religious Organizations.

When examining support networks, while most respondents have someone to talk to within the family and among relatives, there are significant differences regarding other institutions and/or individuals.

In response to the question of whether individuals would like help from someone else when their usual helpers are not available, 40 families of children with disabilities (21 of girls and 19 of boys) said yes. Meanwhile, only 2 families with no difference between genders said they could manage everything by themselves. Meanwhile, 3 families (2 of boys with disabilities and 1 of girls) stated that they would wait until their usual helpers were available rather than seek help from others.

Graph 23. The need for someone else (in cases where the usual helpers are not available) to help according to the gender of the child

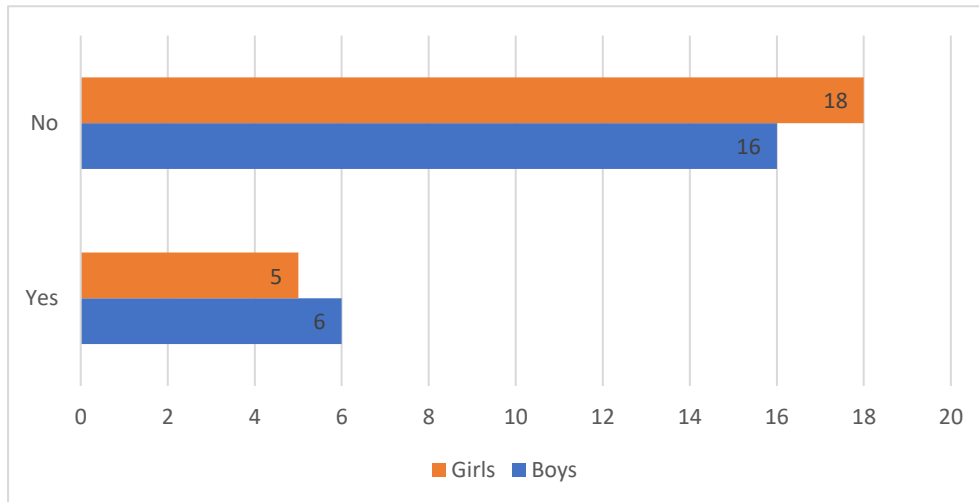


Regarding the need for child care at home, 30 of the respondents expressed the desire to have someone to turn to for help, of which 17 were families of boys and 13 of girls who chose this statement. Meanwhile, 4 families of boys and 4 of girls with disabilities said they get help from their relatives and do not need additional help. In addition, 6 families indicated that they do not need such help, with higher percentages among parents of girls (5) than among parents of boys (1).

In response to the question whether the respondents would be willing to share their living space with someone who would help their child with daily activities, 13 parents/guardians of disabled children expressed their willingness to do so, with slightly higher numbers among parents of girls (7) compared to parents of boys (6). On the other hand, 13 parents/guardians in total declared that they do not need daily help, except in specific cases, of whom 8 were parents of boys and 5 of girls. Furthermore, 16 indicated that they would not share their living space with others, with a higher percentage among parents of girls (9) compared to boys (7). These findings reveal different attitudes towards sharing living space with someone who would help with children's daily activities. While a good portion are open to the idea, there is also a significant percentage who prefer not to share their house. Furthermore, there are gender differences in responses, with parents of girls showing no willingness to share the living space compared to parents of boys.

The findings related to receiving support services and home care from social services, show that a significant part of the respondents, which is 75.6% (34 families in total) reported that they do not receive such assistance. On the other hand, about 24.4% (11 families) of the respondents declared that they receive these services. From the further analyses based on gender, it is observed that among the parents of the boys, there are 6 who report that they receive care and support services at home, while 16 others say that they do not. Among the girls' parents, there are only 5 families who receive these services, compared to 18 others who stated that they do not receive such assistance. These findings show that the majority of respondents, regardless of gender, do not receive home care and support services from social services. However, there is a small percentage who receive such assistance, with slightly more girls benefiting from these services than boys.

Chart 24. Assistance and care services at home according to the gender of the child



The data below analyzes home care and support service providers, illustrating a poor landscape. Among the respondents, 10 parents of children with disabilities (with equal distribution between genders) reported that these services are provided by the state, and only 1 family of boys with disabilities reported the KEMP as the provider of these services. Meanwhile, there are 34 parents of these children who again cite that they do not receive such services, of whom 16 are parents of boys and 18 of girls.

Regarding children receiving personal assistance services, 28.9% of respondents (13 in total) indicated that their children receive such services. Among them, 46.7% (21 in total) reported that their children do not receive this help, and 22.2% (10 in total) were uninformed about these services. Broken down by gender, 6 parents of boys with disabilities and 7 parents of girls with disabilities reported that their children receive personal assistance services.

In assessing overall satisfaction with these services, responses were distributed differently between different levels of satisfaction. 30 parents/guardians of children with disabilities (15 boys and 15 girls) expressed very low satisfaction (rating 1 and 2). Meanwhile, 12 families remained neutral (neither good nor bad) and only 3 families rated 4 (as good services) and none of them gave the maximum rating of 5 points.

Regarding willingness to use personal assistance services if available: A significant majority, 66.7% (30 respondents), expressed the need for this type of support for their children, while 28.9% (13) stated that they would use it, but rarely because they manage activities on their own. There are only 2 families of girls who refused to answer or were unsure about their decision.

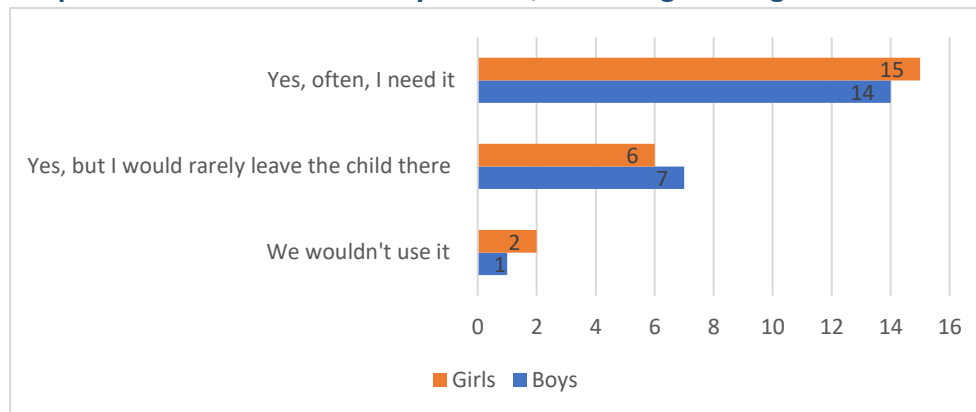
5.2.5 Assessment of social service needs in the local community

The following information reveals the attitudes and awareness regarding the possibility of children visiting the local institution for short-term stays in the day care center. Although the municipality of Klos does not have a day care center, there are 3 parents who have reported that it has a day care center and can use its services, of whom 2 are for boys and 1 for girls. While there are 41 parents (20 of boys and 21 of girls) who

state that they have no idea if such a center exists and 1 parent of a girl with disabilities states that he thinks there is such a center but does not know how to address it.

More than half of the respondents (64.4%) said they would often use these services if they existed, with a slightly higher percentage among parents/guardians of girls (65.2%) compared to boys (63.6%). Furthermore, 28.9% indicated that they would use them but would rarely leave their child there, with almost similar distribution between boys and girls.

Graph 25. Use of centers if they existed, according to the gender of the child



Only 1 family of a boy with disabilities reports that there are clubs in the municipality that offer socialization and entertainment for children with disabilities. While there are 27 parents (14 of boys and 13 of girls) who report that if these clubs existed, they would use them often because they need them. Another 14, with no gender differences, admit that they would use the services of these clubs but less often and only 3 girls' families would not use them if they existed.

Regarding the existence of soup kitchens at the Klos Municipality:

- Only 2 of the respondents (equally dividend by gender) have emphasized the presence of a soup kitchen in the municipality that serves vulnerable categories of citizens.
- However, 40 of the respondents stated that they had no knowledge of these services, with no gender differences, and 3 parents of children with disabilities did not give an answer to this question.

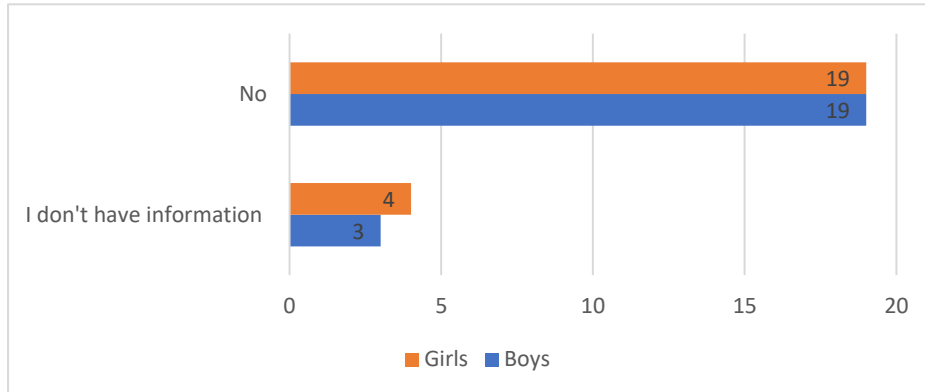
Usage and preference:

- If such soup kitchens existed, 21 of the respondents (12 parents of boys and 9 of girls) said they would use them often.
- On the other hand, 19 stated that they would not use these services. 8 parents of boys and 11 parents of girls belong to this category.

When asked how they would prefer to receive the services of the soup kitchen, 25 of the respondents (11 parents of boys and 14 of girls) said they would like food delivered to their homes several times a month. 10 of the respondents for boys and 8 of the respondents for girls would like to go to the soup kitchen themselves if it existed.

Asked about the organized transport offered by the municipality of Klos to hospitals, care centers or clubs/associations for children with disabilities or other community centers, 84% of respondents (19 parents/guardians of boys and equally 19 of girls) said that they do not have these services available. Moreover, about 16% (3 parents of boys and 4 of girls) said that they lacked information about these services.

Graph 26. Existence of organized transport according to the gender of the child

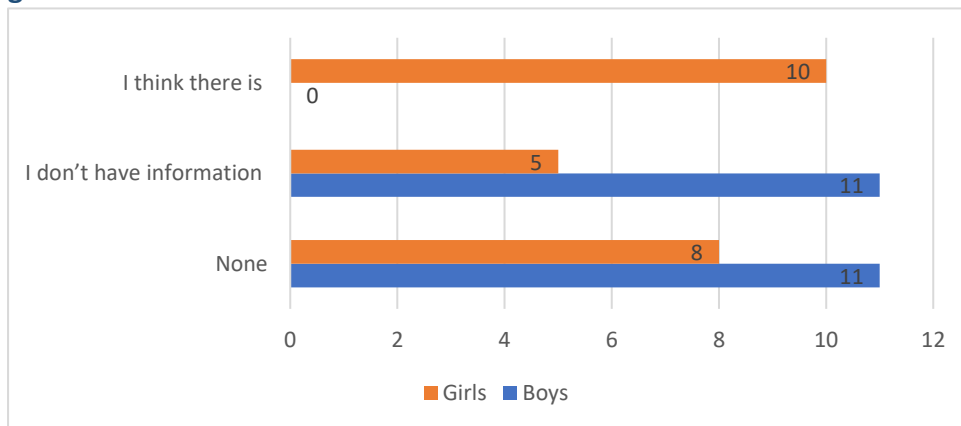


According to the information from the answers collected in Klos Municipality:

- 15 parents of boys and 17 of girls need organized transport to health centers or doctors.
- 16 parents of boys and 20 of girls need organized transport to hospitals.
- 16 parents of boys and 13 of girls need organized transportation to day care centers.
- 14 parents of boys and 12 of girls expressed the need for organized transportation to social service centers.
- 11 parents of boys and 13 of girls have indicated the need for organized transport to the Red Cross.
- 11 parents of boys and 10 of girls need organized transportation to recreational activities.

The survey on the availability of institutions that provide day care for children with disabilities in the municipality reflected different but negative responses. Only one family of a girl with disabilities out of the total number of respondents thought that there was such a center. 53.3% (24 parents/guardians in total) expressed a lack of information, divided into 11 parents of boys and 13 of girls. 44% (20 respondents in total) stated their absence, especially among boys (11) compared to 9 families of girls.

Graph 27. Existence in the municipality of institutions that offer day care, according to the gender of the child



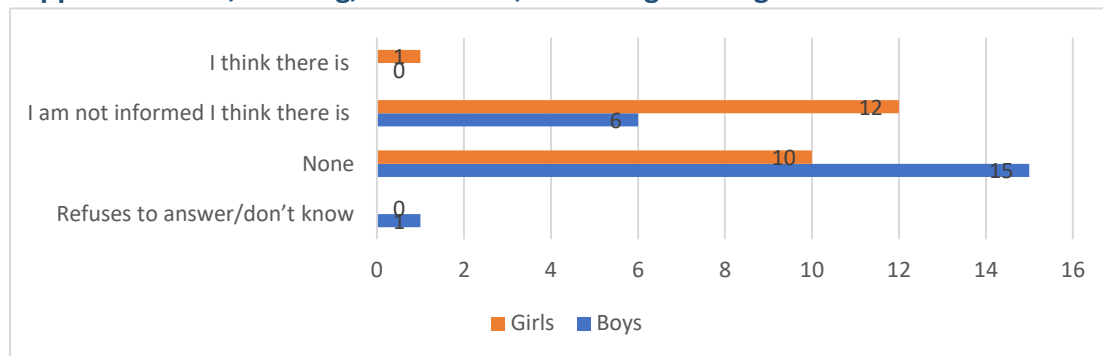
Regarding the above, 66.7% of the respondents (16 parents of boys and 14 of girls) expressed a certain willingness to use these social services if they were available. 22.2% (only 3 boys' and 7 girls' families) stated that they would use these services only if they needed help, with 28.9% of boys and 28.8% of girls expressing this feeling. Meanwhile, 11.1% of the respondents expressed that they would not use these services, where 3 are parents/guardians of boys and 2 of girls who express this view.

Parents/guardians of children with disabilities in Klos Municipality were also asked if there are any institutions in the municipality that provide temporary accommodation for their children with disabilities. There are 24 parents/guardians (15 boys and 9 girls) who state that such an institution does not exist, followed by another 20 (7 boys and 13 girls) who are not informed. However, 1 of the respondents who is the parent of a girl with disabilities stated that the Swiss Center in Burrel municipality could be one of these institutions.

When asked about the willingness to use the above services, 60% of the respondents expressed a complete willingness to use these social services if they were available, of which 15 boys' families and 12 girls' families. Meanwhile, there are 15 families in total, of which 6 are parents of boys and 9 of girls, who would use these services if they existed only if at a certain moment they needed help.

Regarding institutions that provide professional care and support for food, clothing and health care for children who lack the conditions for independent living, only 1 family of a girl thought there was such an institution. 18 others are not informed and 25 families of these children report that such an institution is missing.

Graph 28. Existence in the municipality of institutions that provide care and professional support for food, clothing, health care, according to the gender of the child



When asked about their willingness to use such services, approximately 60% of respondents expressed a complete willingness to use these social services if they were available, of which 14 were parents/guardians of boys and 12 of girls. Followed by 17 families of these children (7 boys and 10 girls) who would use these services only if they needed help.

Parents/guardians of children with disabilities in Klos Municipality were also asked whether there are institutions that offer special rooms: Only 1 parent of a girl stated that in the municipality there may be institutions that offer special rooms (sensory rooms) where students with disabilities can spend a certain period of the day. The majority, consisting of 57.8% of the respondents (15 representatives for boys, 11 for girls), stated that there was no institution that offers such a service, followed by 40% who did not have information, of which 7 were parents of boys and 11 of girls.

22 of the respondents expressed a complete willingness to use these social services if they were available, with similar percentages for both genders. Followed by 21 of them who would only use them if they needed help, with a gender division of 9 boys and 12 girls.

Regarding financial contributions for housing and care within institutions that serve children with disabilities, from the data collected, the analysis revealed that 24 of the respondents reported that they had not been asked to provide financial compensation for various services. On the other hand, a significant majority, accounting for 19 of the total responses, stated that they had not used any child care services.

When asked about the presence of an active telephone number (SOS line) within the municipal administrations for emergencies, 12 of the respondents (4 for boys and 8 for girls) reported the existence of an SOS line in the municipality of Klos; 10 respondents (4 for boys and 6 for girls) expressed a perceived need for such a service due to their child's health condition, despite the lack of this number. On the other hand, 7 stated that they do not require an SOS line, showing different perspectives on its necessity. A significant proportion (16 respondents in total) either refused to answer or were unsure of the existence or necessity of an emergency hotline, suggesting potential gaps in awareness or clarity.

The data below examines the accessibility of various institutions for children with disabilities and reveals some interesting data. **Kindergarten:** 19 respondents reported



adequate access for their children, with a slightly higher proportion of respondents for boys (10) compared to girls (9). **School:** 22 of the respondents indicated adequate access, with no gender differences. **Theatre/Cinema:** Only 2 boys' families reported adequate access. **Library:** 2 boys' and 1 girls' families out of the total respondents reported adequate access. **Hospital/Health Centre:** 31 of the respondents reported adequate access, with a higher percentage among parents/guardians of girls (17 total) than those of boys (14). **Supermarket:** 17 of the respondents reported adequate access, with no significant difference between boys and girls.

These findings show variation in perceived access to institutions, with gender differences observed in some cases, highlighting the importance of tailored interventions to address disparities and ensure equal access for all children with disabilities.

5.2.6 Assessment of Education Services and Facilities

Parents/guardians of children with disabilities in the municipality of Klos were asked about the educational services used by their children in the last 12 months.

- Among respondents whose children attended preschool or daycare, 10 reported positively, with a slightly higher number of parents/guardians of boys (6) compared to girls (4).
- Regarding the attendance of child care centers, 42 of the respondents answered negatively, due to the fact that these centers do not exist within the territory of the municipality, with different ratios between the parents of boys (19) and girls (43).
- For transport services or home learning, only 7 of the respondents answered positively, with a slightly higher percentage of parents/guardians of girls (5) compared to boys (2).
- Regarding attendance at regular schools, 24 of the respondents answered positively, with an equal percentage between boys and girls. There are 11 girls and 9 boys who have not attended regular school in the last 12 months.
- As for attendance at special schools, only 1 parent of a boy has attended this institution in the last 12 months.
- For educational services in hospitals (in cases where children have to stay in hospital for a long time), only 4 of the respondents answered positively, with a higher number for girls (3) compared to those from families of boys (1).
- Among those who receive support from teachers for special needs, 12 of the respondents affirmed this fact, with different proportions between parents/guardians of boys (5) and girls (7). However, there are about 30 people (15 for boys and 15 for girls), who have not received this service.
- Regarding dedicated teaching assistants or support assistants for learning, only 8 of the respondents accepted this fact, with slightly higher proportions in the families of boys (5) compared to those of girls (3). There are 20 girls and 15 boys who have not received their services in school.
- Regarding the educational psychologists, 18 of the respondents answered positively to this question, with apparent different proportions between the families of boys (6) and those of girls (12).

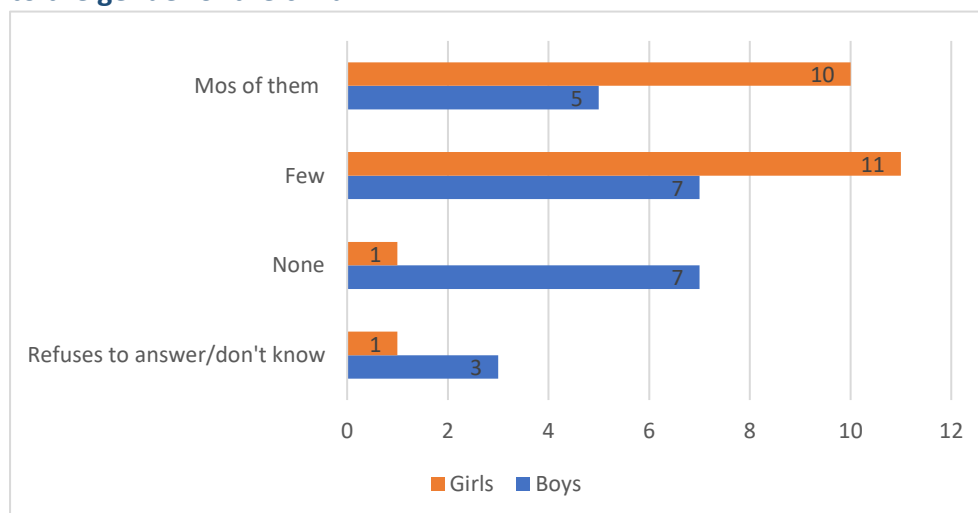


- Among those attending advanced education schools, 2 parents of children with disabilities (one per gender) affirmed this fact.

These findings illustrate the diversity of educational services used by children with disabilities in the past year, with variations in attendance rates at different types of institutions and support services. Furthermore, gender differences in participation rates are observed in several categories, suggesting potential areas for further research or targeted interventions to address disparities, especially in the provision of support teachers in schools.

From the analysis of the graph below, it appears that a significant part of the respondents believe that they have received most of the necessary educational services for their children in the last 12 months. Specifically, among those who indicated that they had received the majority of services, there are approximately 15 respondents who affirmed this, of whom 10 are girls and 5 are boys. Next, some respondents thought that they had received only some of the necessary services, which constituted 18 of the total number of respondents, of whom 7 were boys and 11 were girls. Notably, some respondents believed that they had not received any of the requested services, representing 8 percent, with a higher percentage among boys (7) compared to girls who had not received any services. None of the respondents reported that they had received all the necessary educational services during the last 12 months. These findings highlight the differing perceptions of parents regarding the appropriateness of the educational services received by their children and highlight potential areas for further exploration or clarification.

Chart 29. Educational services received by the child during the last 12 months, according to the gender of the child



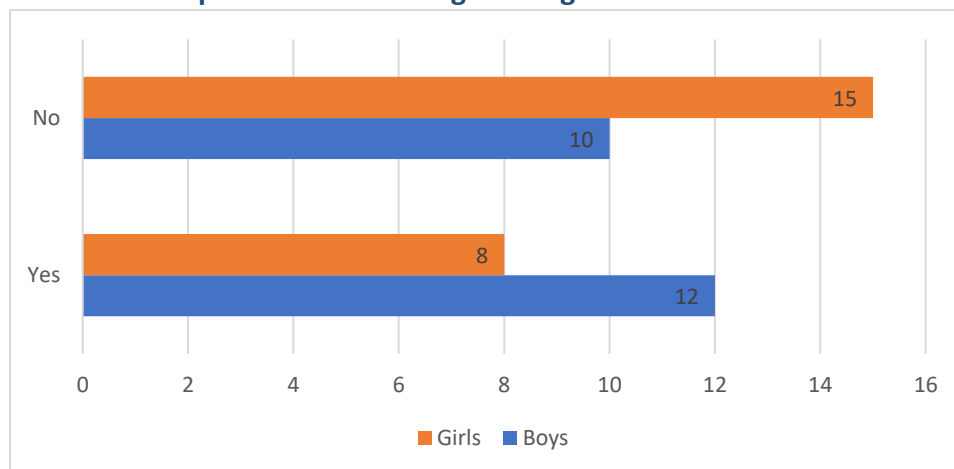
Following the above question, a very low number of the 45 respondents reported the presence of special departments or classes for children with disabilities in schools. Specifically, only two parents (one per gender) have affirmed the existence of such classes. On the other hand, 33 respondents (14 for boys and 19 for girls) stated that their schools did not have specialized departments or classes for children with disabilities. Also, 10 of the respondents (7 for boys and 3 for girls) either refused to answer or claimed not to know, indicating a considerable amount of uncertainty

regarding this issue, especially among parents of boys. These findings highlight the inadequacy of specialized educational resources for children with disabilities in schools, highlighting potential campaigns and interventions for improvement or further research.

The following data relate to the educational support services needed for children at the local level, according to the field survey. Special teachers are sought by 21 parents, of whom 9 of boys and 12 of girls. Programs for children with down syndrome and those with visual impairments are required from 4 parents, 3 of boys and 1 of girls. There are 3 families, two of boys and 1 of girls, who report that they lack all the services for their children at school.

The analysis of the following question shows that 20 of the respondents report that they have received special compensation as parents or guardians of children with disabilities, while the majority, which is 25 of the respondents, do not receive such compensation. Among the respondents for boys, 12 receive special compensation, compared to 8 of the respondents for girls. Conversely, a higher percentage of respondents for girls (15) compared to those for boys (10) indicate that they did not receive special compensation. Overall, the data suggest variability in the provision of special compensation for caring for children with disabilities, with slightly different trends observed between parents/guardians of boys and girls.

Chart 30. Compensation according to the gender of the child



It is interesting to note that 11 of the parents/guardians surveyed (4 for boys and 7 for girls) report that they were asked for financial resources for educational services. While 28 of the other respondents, regardless of gender, said that they had not been asked for something like this anywhere. 6 parents (4 of boys and 2 of girls) refused to answer this question.

5.2.7 Assessment of the views and needs of people with disabilities

When asked if they follow the latest developments in the country, 6 of the respondents (1 of the parents/guardians of boys and 5 of girls) reported that they follow them. Also, 16 of the respondents follow developments often (several times a week), boys' families (9) and girls' families (7). Moreover, 18 of the respondents follow developments rarely (several times a month), with a slightly higher number among respondents for girls (10) compared to respondents for boys (8).



Regarding the adoption of policies at the local level in the last three years that are of interest to them as parents/guardians of children with disabilities, the data show that only 7 of the respondents accept the adoption of such policies. Specifically, 3 parents of boys and 4 parents of girls reported approval of these policies. Conversely, 15 of the respondents stated that such policies had not been adopted, without any apparent gender difference. Furthermore, a significant proportion of respondents (23) either refused to answer or did not know about the adoption of these policies, with 11 for boys and 12 for girls falling into this category.

Regarding the advocacy actions taken by the respondents, there are some interesting findings:

- **Meeting with the members of parliament of their area:** Only 2 parents/guardians of children with disabilities, regardless of the gender of the children.
- **Meeting with municipal council:** There are 15 parents (7 of boys and 8 of girls) who have organized such meetings.
- **Meeting with the mayor of the municipal council:** There are 16 parents (7 of boys and 9 of girls) who report that they have had such meetings to advocate for their children.
- **Meeting with the mayor:** There are 25 parents (11 of boys and 14 of girls) that have had meetings with the mayor for their children.
- **Official letter to the municipality:** Only in 3 cases (1 for boys and 2 for girls)
- **Participation in protests:** Only in 2 cases, regardless of gender, they report using this means of advocacy.
- **Signing a petition:** Only in one case from a family of a girl with disabilities.

In terms of trust in various institutions, the main findings of parents/guardians of children with disabilities in Klos municipality are listed as follows:

- **Trust in the President:** Only 3 of the respondents have shown trust, where all 3 are parents/guardians of boys.
- **Trust in the Government:** Only 8 of the respondents have shown trust, where 5 are parents/guardians of boys and 3 of girls.
- **Trust in the mayor:** 23 of the respondents have shown trust, where 14 are parents/guardians of boys and 9 of girls.
- **Trust in Public Institutions of Local Government:** Only 11 of the respondents expressed trust, where 4 are parents/guardians of boys and 7 of girls.
- **Trust in the police:** Only 13 of the respondents have shown trust, where 7 are parents/guardians of boys and 6 of girls.
- **Trust in NGOs:** Only 3 of the respondents have shown trust, where 2 respondents are parents/guardians of boys and 1 of girls.
- **Trust in religious institutions:** 18 of the respondents have shown trust, where 11 are parents/guardians of boys and 7 are of girls.

The above analysis reflects a rather low trust of parents/guardians of children with disabilities towards institutions, whether central or local.

Parents/guardians of children with disabilities were also asked what the priorities of the municipality of Klos should be.

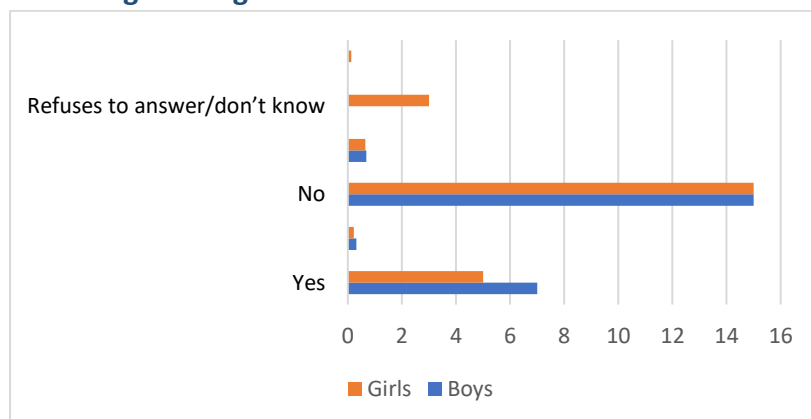
- **Education:** 33 of the respondents chose education as a priority, where 14 are parents/guardians of boys and 19 of girls with disabilities.
- **Health care:** 40 of the respondents have selected health care as a priority, where 19 are parents/guardians of boys and 21 of girls with disabilities.
- **Regarding the priorities in the Support of People with Disabilities:** Almost all of the respondents (44) have chosen this priority, where 21 are parents/guardians of boys and 23 of girls with disabilities.
- **Housing:** 32 of the respondents chose housing as a priority, with 15 respondents being parents/guardians of boys and 17 of girls with disabilities.
- **Regarding the priorities in Aid to the Poor:** 40 of the respondents have chosen this priority, where 18 are parents/guardians of boys and 22 of girls with disabilities.
- **Environmental protection:** 23 of the respondents have chosen this priority, where 10 are parents/guardians of boys and 13 of girls with disabilities.
- **Regarding priorities in Public Infrastructure:** 37 of the respondents have selected public infrastructure as a priority, where 18 are parents/guardians of boys and 19 of girls with disabilities.
- **Drinking water supply:** 25 of the respondents have chosen this priority, where 13 are parents/guardians of boys and 12 of girls with disabilities.

However, when the respondents were asked if they join other parents of children with disabilities, it turned out that only 9 of them (5 boys and 4 girls) join together to advocate together, out of a total of 45 interviewed. Following, there are only 4 parents/guardians of children with disabilities, 2 of boys and 2 of girls, who knew any civil society organizations that represented this category.

5.2.8 Discrimination – Risk Factor

Regarding the perception of whether the rights of people with disabilities are respected, results show that only 12 of the respondents (7 of boys and 5 of girls) believe that these rights are respected.

Chart 31. Respect for the rights of people with disabilities, according to the gender of the child





Based on the obtained data on whether respondents or their children with disabilities have felt discriminated against in the last 12 months, it turns out that 20 of the participants, including 8 of the parents/guardians of boys and 12 of girls, affirmed that they had experienced discrimination. The respondents who felt discriminated listed different situations of everyday life.

- **At work:** 2 of the respondents (1 for boys and 1 for girls) claimed that they feel discriminated all the time in the workplace and another 10 reported that they sometimes felt discriminated against, of whom 4 for boys and 6 for girls.
- **In healthcare centers/hospitals:** 2 of the respondents (1 for boys and 1 for girls) claimed that they feel discriminated all the time in these institutions and 5 others reported that they sometimes felt discriminated, of whom 2 for boys and 3 for girls.
- **Public transport:** 5 reported persistent discrimination (2 for boys and 3 for girls), followed by 14 respondents who had experienced occasional discrimination on public transport, of whom 5 were parents of boys and 9 of girls.
- **Interactions with other people:** 7 of the respondents (4 for boys and 3 for girls) reported constant discrimination, with another 16 experiencing discrimination occasionally, of whom 9 parents of girls compared to 7 of boys.

It is the parents/guardians of girls with disabilities who feel the most discrimination in different situations or institutions where services are offered.

Respondents who admitted being discriminated against were also asked whether they had reported the case of discrimination. There are only 3 cases who claim to have reported the case. But, when asked about the institution or about the results, the answers are vague. Therefore, more in-depth research is needed regarding the awareness of parents with disabilities about where they should report in cases of discrimination against them or their children.

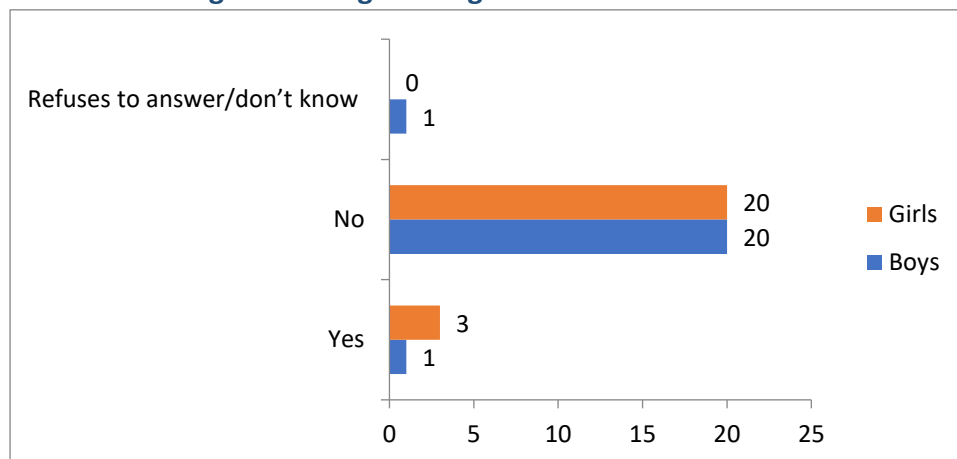
The following data show whether parents/guardians of children with disabilities feel protected as citizens in situations where they are deprived of rights and subjected to discrimination because of their children's disability. 7 of the boys' parents and 7 of the girls' parents answered positively, showing that they feel protected in such situations. In contrast, 10 parents of boys and 9 of girls reported feeling unprotected, leaving a total of 12 parents (5 of boys and 7 of girls) who refused to answer or were unsure whether or not they were protected. The data highlight variations in perceptions of protection among citizens facing discrimination, indicating the need for further consideration of the mechanisms in place to protect individuals' rights and address cases of discrimination effectively.

5.2.9 Vulnerability to shocks

The following data provides information about the impact of the emergence of the new virus on daily activities, categorized according to the different statements and the gender of the children. For example, 17 of the respondents representing parents/guardians of boys and 14 of the respondents for girls stated that during that

period they did not leave the house as before because they protected the child's health. 39 out of 45 respondents stated that their expenses increased a lot during that period, with an almost equal gender distribution. And again, 39 of the respondents stated that their income was not enough during the pandemic, without any essential difference between the genders. 32 out of 45 respondents (18 for boys and 14 for girls) needed help from the municipality to be equipped with protective equipment. 40 of the respondents stated that they do not have savings that they can use to solve the ongoing problems caused by the coronavirus situation, with equal gender distribution. 26 of them have stated that they entered into debts to cope with the financial situation as a result of the coronavirus.

Chart 32. Savings according to the gender of the child



14 of the respondents (6 for boys and 8 for girls) stated that they received financial help to cope with the Coronavirus, of which 10 families received help from the municipality (4 for boys and 6 for girls), 3 families received help from social center, 4 families (equal gender distribution) report that they received help from religious institutions.

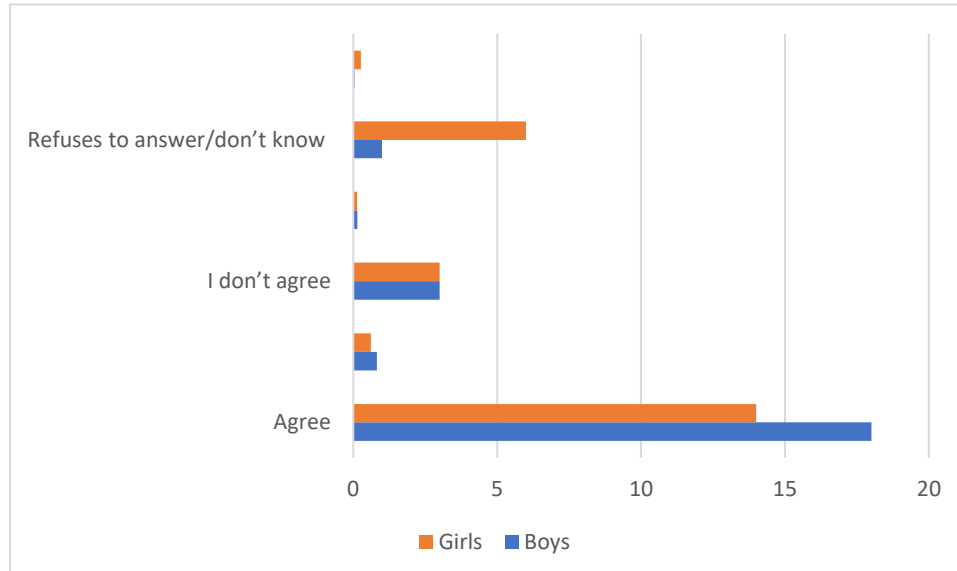
Financial support was the biggest need these families needed during the pandemic, with 43 of those surveyed agreeing with this statement. Followed by the provision of medicines and additional vitamins that are necessary, a request that is stated by 36 of the respondents. Following are 31 parents/caregivers of children with disabilities (12 of boys and 19 of girls) who also listed the need for psychological support during the pandemic.

The following data presents the answers regarding the perceptions of safety, categorized according to the different statements and the gender of the children. Each statement reflects a perception or concern about safety, and respondents were asked to indicate whether they agreed or disagreed with each of these statements.

For example, only 2 of the respondents who answered for boys and 2 of the parents/guardians of girls stated that their neighborhood is not at all safe and that they are afraid to live there, while another 36 families (equally divided between boys and girls) perceive their neighborhood to be safe.

8 of the respondents (4 for boys and 4 for girls) stated that they need additional safety equipment to feel safer (camera, locks, light with sensors, alarm). 32 out of 45 respondents (18 parents of boys and 14 of girls) stated that the police should patrol the area more often.

Graph 33. The police should patrol more often, according to the gender of the child



The following information presents responses that show to whom individuals would turn for help in the event of a disaster (earthquake, flood, fire), segmented by gender of children.

Among respondents, 20 said they would always turn to their other children or grandchildren for help, with more parents/guardians of boys (11) than girls (9).

- About 37.8% of respondents (8 for boys and 9 for girls) indicated that they would seek help from friends.
- 31 of respondents, with slightly more for boys (17) than for girls (14) stated that they would rely on local authorities or organizations for help.
- 20 of the respondents stated that they would rely on humanitarian organizations such as the Red Cross for help, with a higher number among respondents for girls (11) compared to respondents for boys (9).
- Only 4 of the respondents (2 for each gender) declared that they do not need help.

The data below presents responses to the question regarding perceptions about pandemics, segmented by children's gender.

- People with higher incomes and higher-status occupations have a better chance of protection because they have connections to public hospitals for faster treatment: 33 of those surveyed agreed with this statement, with a number slightly higher among respondents for girls (18) compared to respondents for boys (15).

- Every citizen of the country has the same opportunity to receive the necessary treatment: Among the respondents, 15 agreed with this statement, of which 8 were parents of boys and 7 were parents of girls.
- We as parents/caregivers of children with disabilities are left behind: 25 of the respondents agreed with this statement, with a higher number among parents of girls (14) compared to respondents among parents of boys (11).
- The state has not forgotten us, but the local government takes care of us as citizens: There are 22 respondents who agree with this statement, with a slightly higher number of respondents for boys (12) compared to those for girls (10).

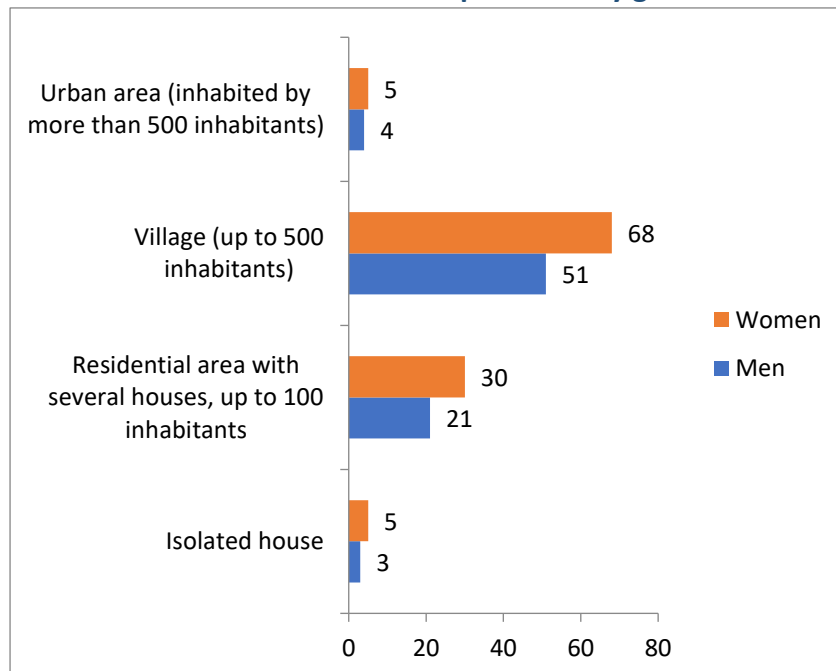
5.3 LNOB Group – People with disabilities (+18 years old)

5.3.1 Demography and Socio-Economic Status

Most of the respondents state that they come from villages on the outskirts of the Klos urban unit, with a population of up to 500 inhabitants. We noticed that the percentage of female disabled people is higher compared to the percentage of male disabled people.

From the graph, we see that 63% of the respondents live in the village in an area of up to 500 inhabitants with a peripheral distance where the number of women prevails compared to that of men.

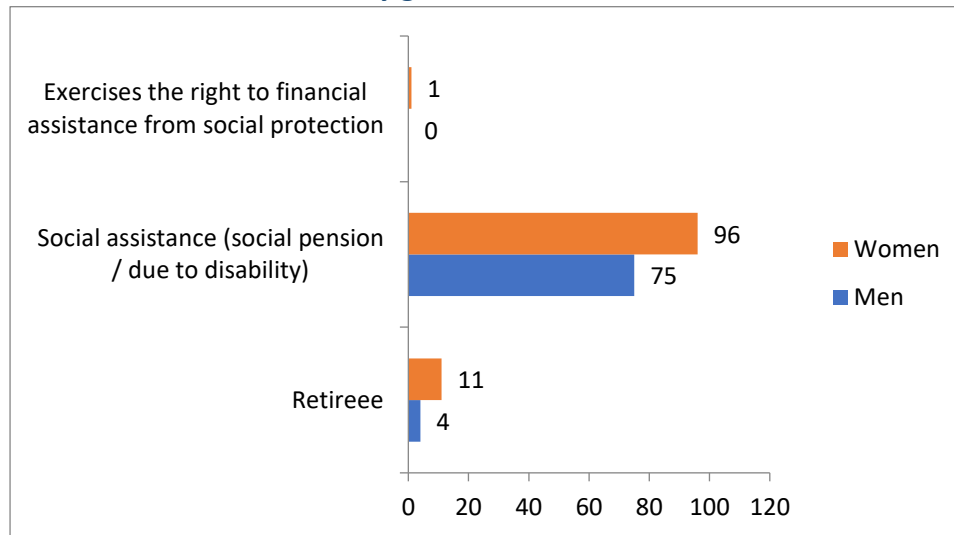
Chart 34. Place of residence of respondents by gender



In total, 47.6% of the interviewees are married; 13.9% are widowed; 36.9% are single, 0.5% are divorced and 1.1% are cohabiting. Married people who had children reported that they lived together with their children and that they were the ones who helped them with what they needed (20 men and 30 women), but that although they received help from them, it was not enough.

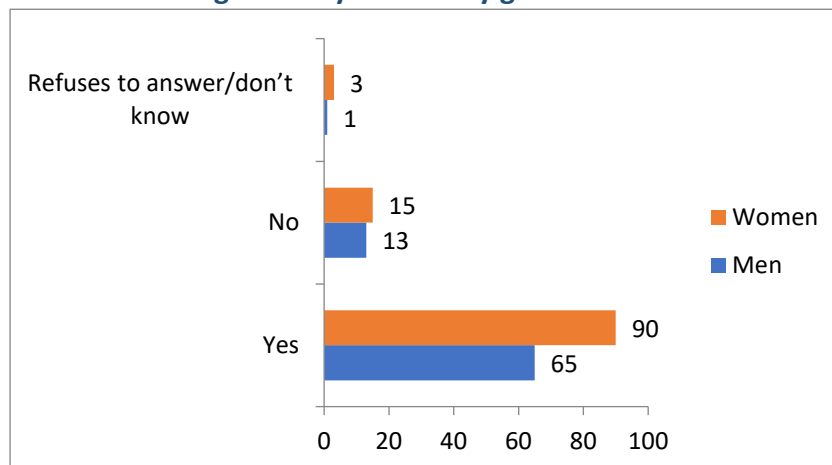
The chart below illustrates the economic status of individuals broken down by gender. Among men, 94.9% receive social assistance (social pension / due to disability); 5.1% are pensioners; if we look at the trend of women, we have 88.9% who receive social assistance (social pension / due to disability) while we have 10.2% who are retired. None of the interviewees were employed, of which 68.4% (73 women and 55 men) reported that they could not work due to disability. There were 2 men and 1 woman who helped in the family business.

Chart 35. Economic status by gender



From the interviews regarding their income, the results are presented according to the chart below, where a total of 82.9% answered positively, while 2.1% of them refused to answer. Of the men, 65 of them claimed to have a monthly income and 13 did not have a monthly income; while we have 90 women who claimed to have a monthly income and 15 had no monthly income.

Chart 36. Having monthly income by gender

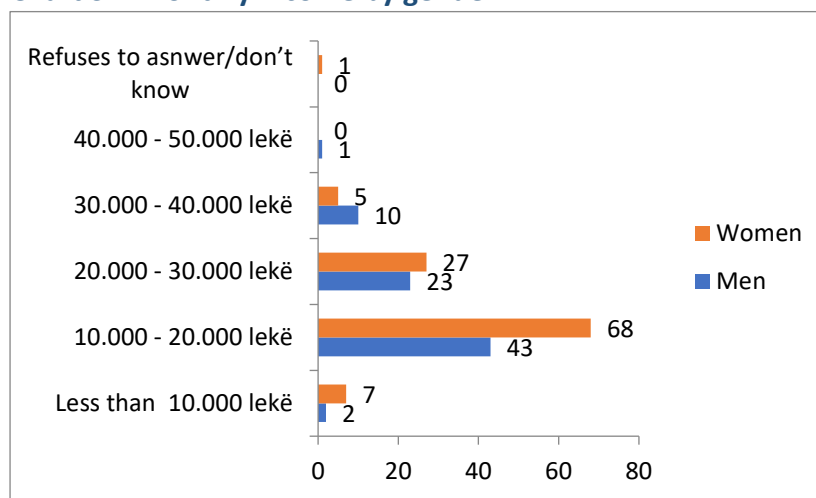


To the question of how they receive their income, we have: 38% of men and 39.8% of women who received their income from the social right for assistance. It is interesting that there are 3 men and 1 woman who report that they received income from work, although in their employment status there are only 3 disabled people who helped in the family business. Subsequently, 35.4% of male respondents with disabilities

received pension income compared to 39.8% of females in the same category. None of the respondents received unemployment compensation income.

Regarding monthly income, the chart below provides data on the monthly income of individuals, categorized by gender. Among men, the largest percentage reported a monthly income ranging from 10,000 to 20,000 ALL, accounting for 54.4% of the total number of men. This was followed by the income range from 20,000 to 30,000 ALL, with 29.1% of men falling into this category. On the other hand, the largest percentage of women reported a monthly income between 10,000 and 20,000 ALL, 63.0% of the total number of women. While we have 4.6% of women who reported an income from 30,000 to 40,000 ALL, but what is worth noting is the figure of 25% who receive an income from 20,000 to 30,000 ALL, represented as the second highest percentage in this category.

Chart 37. Monthly income by gender



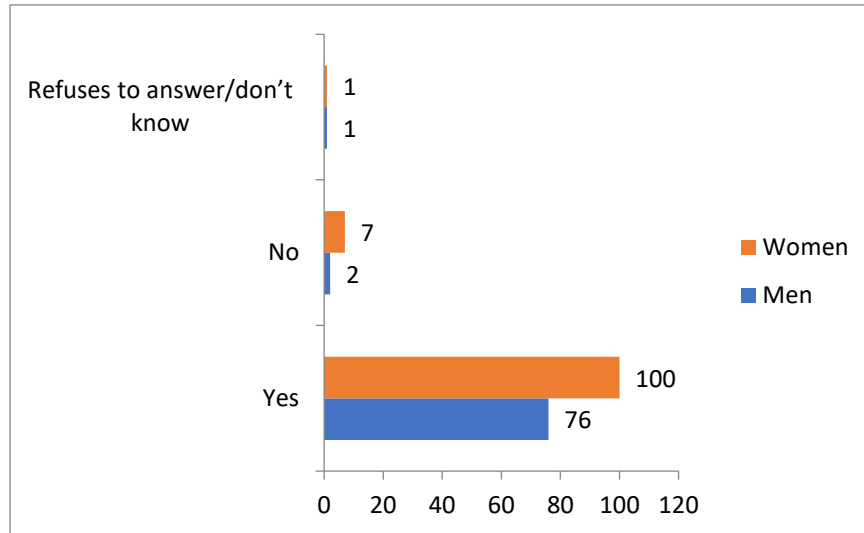
In terms of receiving the lowest income, 2.5% of men and 6.5% of women reported an income of less than 10,000 ALL. A small proportion of women (0.3%) refused to answer or did not know their monthly income.

Among men, the majority (62.0%) state that their budget does not meet basic needs, while 36.7% reported that they meet these needs. In contrast, a slightly higher proportion of women (66.7%) state that their budget does not meet basic needs, with 29.6% saying that they meet these needs. Also, a small percentage of men (1.3%) reported that they can save something from their budget, while only 2.8% of women ranked in this category. Second, a very small percentage of individuals, one female, stated that they live comfortably without saving.

The analysis highlights different reporting behaviors in financial support across categories and gender. Of the men, 34.2% reported that they receive financial support from their wives, while for women, 33.3% reported that they receive financial support from their husbands. For the "brother/sister/child" category: men 58.2% and women 59.3%. As in the previous category, a small percentage of males (3.8%) and females (2.8%) reported receiving support from cousins. Only 22.8% of men and 20.4% of women reported receiving support from the government.

Of the interviewees, 96.2% of men and 92.6% of women reported that they have enough drinking water at home. While we have a small percentage, consisting of 2.5% of men and 6.5% of women who reported that they do not have enough drinking water. Overall, these data suggest that most individuals surveyed had sufficient access to drinking water at home during the past month, with a slightly lower percentage of females.

Chart 38. Access to drinking water by gender



People with disabilities were also asked if they had enough food in the past month, resulting in 77.2% of men and 84.3% of women having enough food and never having such a shortage. But, about 8.9% of men and 7.4% of women faced moments when they did not have enough food, several times during the past month. And for others, it has been difficult. For 3.8% of men and 1.9% of women, they had to deal with lack of food more than 4 times during the past month. These data suggest that while the majority of interviewees did not experience food insecurity in the past month, a significant proportion reported challenges related to access to and lack of food, with a slightly higher proportion of men indicating higher levels of food insecurity compared to women.

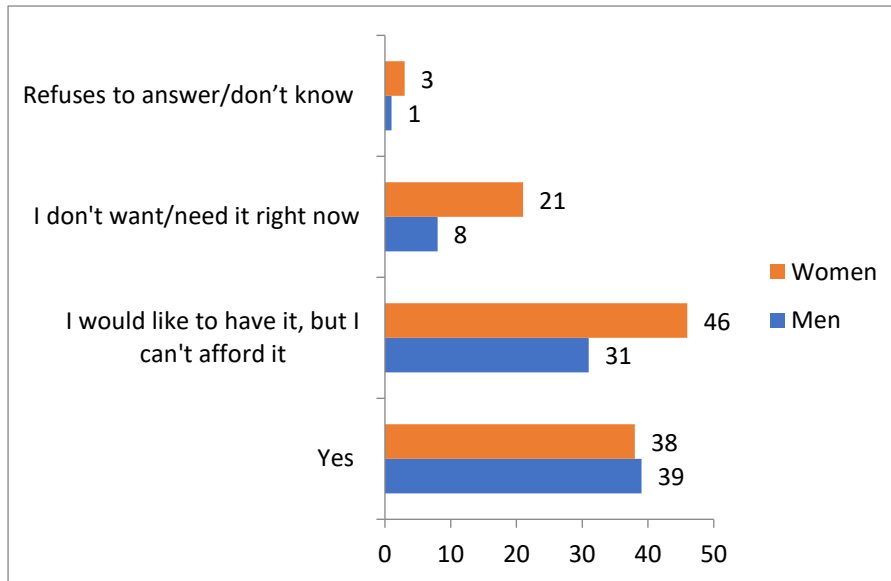
The following data show the presence of computers/laptops or tablets at home, according to gender. About 26.6% of men and 20.4% of women are reported to have such devices at home. But the majority, 73.4% of men and 78.7% of women reported that they do not have computers or similar devices at home. This data shows that a large part of the surveyed population does not have access to technological devices in the home environment. This underlines the importance of taking into account these inequalities in development contexts.

The data in the following table provide information on the use of the Internet by people with disabilities, according to gender. From the survey, 49.4% of men and 35.2% of women reported that they have access to the Internet (using it more on mobile phones).

A significant proportion of 39.2% of men and 42.6% of women expressed a desire to have access to the Internet, but cited financial constraints as an obstacle. From here

we understand that there is a demand for internet access but financial constraints limit their ability to get it.

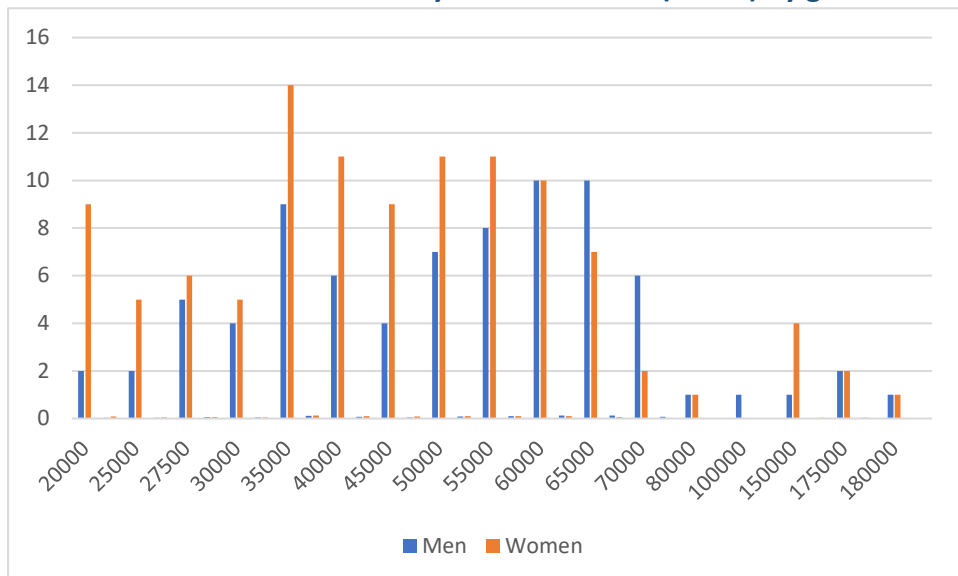
Chart 39. Internet access by gender



Next, from the survey for people with disabilities in the municipality of Klos, we find that 87.3% of men and 84.2% of women reported that they have access to television channels adapted for them, but 7.6% of men and 8.3% of women expressed the desire to have these channels but emphasized the lack of financial resources. From here we understand that there is a demand for television content tailored to this category and it is financial constraints that prevent some of them from accessing it.

The following data provide an interpretation of the answers to the question regarding the need for monthly income to afford living, according to gender, men and women. It is worth mentioning that about 8.9% of men and 10.2% of women think they need about 50,000 ALL every month. From another perception, we have an almost equal percentage from both genders, 10.1% men and 10.2% women who think they need about 55,000 ALL per month. Then we have a percentage of 1.3% of men and 3.7% of women who think they need more than 150,000 ALL per month. Likewise, there is a group, about 12.7% men and 6.5% women, who think they need about 65,000 ALL per month. On the other hand, some answers estimate higher monthly expenses, with only 1.0% thinking about 120,000 ALL per month. These data highlight the diversity in the financial needs of the interviewees, reflecting the complexity of economic conditions and individual perceptions regarding the cost of living.

Chart 40. Assessment of monthly financial needs (in ALL) by gender

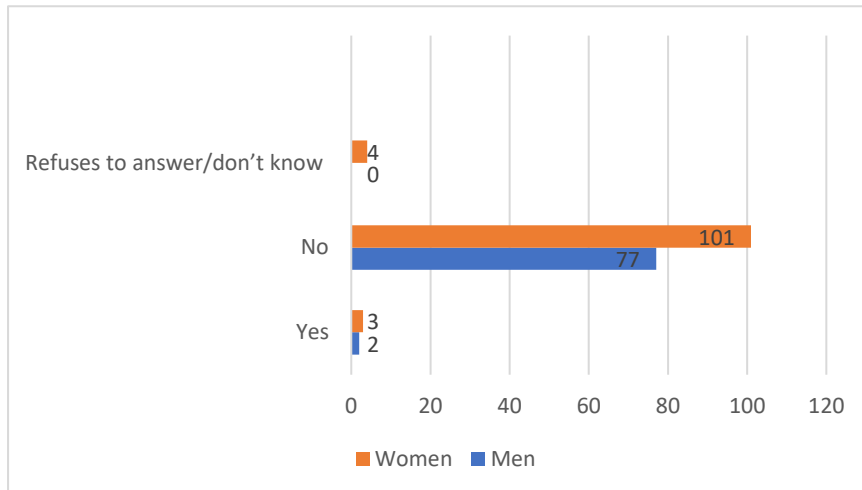


Regarding the question about the ability of the interviewees to pay for sufficient heating at home, the responses by gender show that 82.3% of men and 93.5% of women affirm that they have the ability to pay for heating costs. Meanwhile, 17.7% of men and 6.5% of women claim that they struggle to cover these expenses. This data, in general, shows that a small number of interviewees face challenges in paying heating expenses.

People with disabilities in the municipality of Klos were also asked about the possibility of a 1-week vacation away from home, the majority of respondents, namely 89.9% of men and 90.7% of women, reported that they could not afford these expenses, expressing the financial limitations for these types of activities.

Following this, 46.8% of the male respondents and 42.6% of the female respondents affirmed that they can afford a vegetarian diet or its equivalent with meat. While we have 49.4% of men and 53.7% of women who deny the opportunity to face these expenses. When asked if they have the opportunity to hire someone to take care of them, the interviewees are only 2.5% of men and 2.8% of women who have this opportunity; while 97.5% of men and 93.5% of women denied such an opportunity and declared that they are unable to afford these expenses.

Chart 41. Chance to hire someone for help by gender



When asked about purchasing medications for themselves or their children, 67.1% of men and 64.8% of women stated that they can cover the cost of purchasing medications, but 29.1% of men and 31.5% of women stated that they are unable to afford these expenses. These data show the difficult financial situations that individuals face when it comes to accessing necessary medications for themselves or their children.

When asked whether they agree or disagree with specific statements that reflect their living conditions and needs, the respondents' opinions are divided into 49.4% of men and 65.7% of women who stated that they do not have good living conditions to take care of their children with disabilities. While 11.4% and 6.5% of them affirmed that they can afford the expenses and that they have everything they need.

Regarding the financial challenges the respondents faced during the last 12 months, we have the data by gender and the types of financial challenges they faced.

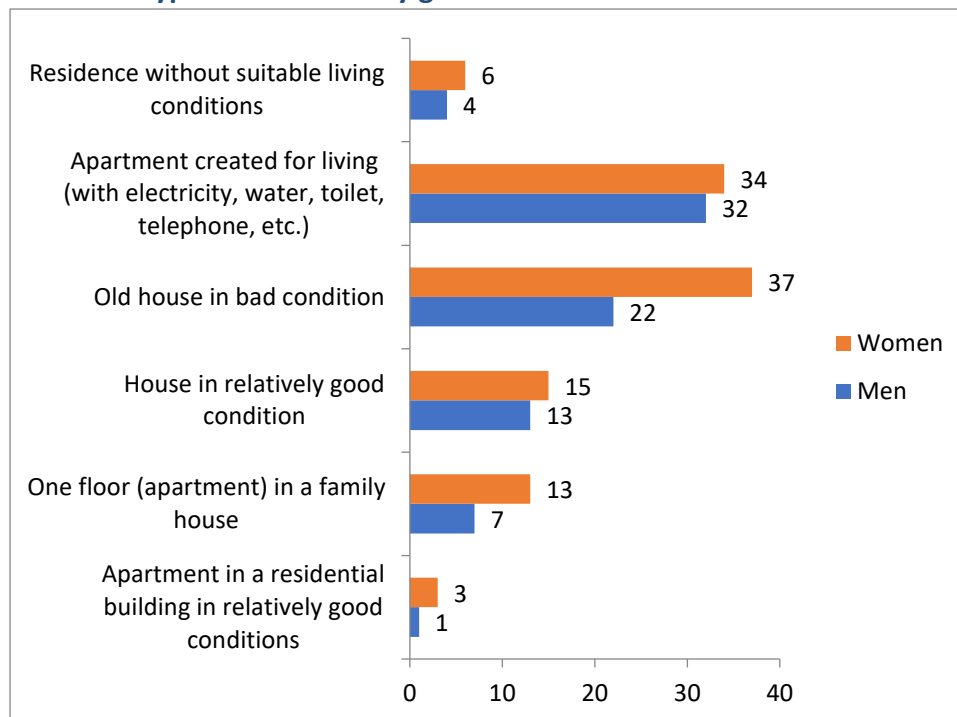
- **Payment of bills (Water, Electricity, Telephone):** A significant part of the respondents faced difficulties in paying bills. Among men, 54.4% encountered such challenges several times, while among women, it was slightly higher at 56.5%.
- **Home Repairs:** About 63.3% of men, and 65.7% of women reported facing financial obstacles related to home repairs.
- **Food Expenses:** 17.7% of men and 8.3% of women have difficulties with food expenses. However, a significant number of 70.9% of men and 74.1% of women stated that they did not face such challenges.
- **Medical Expenses (Medications):** 21.5% of men and 19.4% of women faced difficulties several times regarding medical expenses, especially with the purchase of medications; while we have 55.7% men and 51.9% women who have not encountered this difficulty.

The above results highlight the existence of financial difficulties among survey participants, highlighting the need for help and guidance in analyzing household expenses and predictable financial burdens.

5.3.2 Geography – risk factor

The survey investigates the types of accommodation among the interviewees, shedding light on their different housing situations. Through the answers we understand that a good part of the participants in this survey with 40.5% men and 31.5% women live in houses created for living (with electricity, water, toilet, telephone, etc.). Also, a significant percentage, 27.8% of male participants and 34.3% of female participants, live in old houses in unfavorable conditions. In addition, there are individuals living in one-story apartments in family homes, accounting for 10.7% of the surveyed population. Again, a significant number of respondents live in relatively comfortable homes, represented by 15% of the total number of respondents. Finally, some respondents live in settlements without adequate living conditions, accounting for 5.3% of the total number of respondents. These findings highlight the different housing situations among the individuals surveyed.

Chart 42. Type of residence by gender



Asked whether their housing meets living conditions, the data reveals interesting trends. About 10.1% of men and 13% of women reported that their housing meets the necessary standards of living. We continue with 57% of men and 47.2% of women who said that their houses do not meet these conditions. Also, 32.9% of men and 39.8% of women mentioned that their houses partially meet the required living standards.

About 22.8% of men and 30.6% of women reported that they live on the ground floor, which favors the mobility of these disabled people. After that, 68.4% of men and 61.1% of women live on the first floor, while 7.6% of men and 6.5% of women live on the second floor. In addition, 1.3% of men and 1.9% of women indicated that they live on the third floor or higher. To follow, 93.7% males and 94.4% females reported that they do not have an elevator that helps their children's mobility because they live on the first floor of apartments/houses above the ground floor.



When asked if their home has adequate access for wheelchairs, crutches or other assistive devices, 97.5% of men and 93.5% of women reported that their homes do not have sufficient access compared to 2.5% of men and 6.5% women who affirmed that they have sufficient access to their homes for these people.

Regarding the ownership of the houses where they live, 72.2% of men and 56.5% of women declared that they themselves are the owners. While 8.9% of men and 14.8% of women reported that their houses belong to their family members who do not live with them. In addition, 7.6% of men and 10.2% of women mentioned that their houses were built without permission, while only 1.3% of men reported that the house they lived in is owned by a person with whom they have no family relationship.

When analyzing data related to home appliances, it is evident that a large percentage of men and women have access to essential services in their homes. For example, a significant part of them claimed to have kitchens (92.4% of men and 92.6% of women), indoor plumbing (93.7% of men and 90.7% of women), bathrooms and showers (70.9% of men and 73.1% of women), and electrical installations (87.3% males and 90.7% females) within their place of residence.

5.3.3 Needs assessment for people (+18 years old) with disabilities

Of the people with disabilities interviewed and participants in this survey, their disabilities vary, with the most important being: physical disabilities; intellectual disabilities; visual impairments; hearing and/or speech impairments; autistic spectrum disorder; and combined disabilities (a combination of several disabilities). Additionally, participants were asked about their general state of health.

Only 13.9% of men and 17.6% of women categorize their condition as good, while 15% overall (22.8% of men and 9.3% of women) consider their health condition to be satisfactory. The largest percentage of respondents (64.7%) consider their general state of health to be bad, with women being the majority in this category (75 women compared to 46 men). There are several causes of disability among the interviewed people. The most common cause is disabilities since birth, affecting 48.1% of men and 36.1% of women, followed by aggravated diseases, affecting 26.6% of men and 52.8% of women. Women are more likely to have disabilities that have resulted from long-term chronic illnesses that were not properly treated.

To continue, on a scale from 1 to 5, where 1 is the lowest rating and 5 is the highest, disabled people were also asked how they feel about several factors:

Regarding personal relationships with other people, 43.3% of the interviewees chose evaluations 1 and 2, indicating the weakest evaluations. This includes 35 men and 46 women. About 24% of women and 25.3% of men feel neutral about their relationships with others, rating them neither good nor bad. Additionally, 32.1% of the respondents selected the highest ratings of 4 and 5 points, indicating good or very good relationships. Specifically, 21 women and 15 men report good relationships, while 15 women and 9 men report very good relationships with other people.

If we examine the needs of this target group for various services or medical examinations over the past 12 months, we will find interesting data about the requests made by both sexes for these services.



- Regarding general medical examinations such as blood or urine tests, 8.9% of men with disabilities and 9.3% of women reported that they needed these tests once but did not receive them. Similarly, 8.9% of men and 9.3% of women needed these services multiple times in the last 12 months but did not receive them. In contrast, 78.5% of men and 64.8% of women who needed these examinations received them in the last 12 months.
- About 9.6% of the interviewees (6 men and 12 women) needed specialized examinations (dentist, ophthalmologist, and/or gynecologist) at least once but did not receive them. Additionally, among people with disabilities who needed these services multiple times, 11.2% did not receive them. This group consists of 10 men and 11 women. Of all the interviewees, 56.7% received the specialized services they needed.

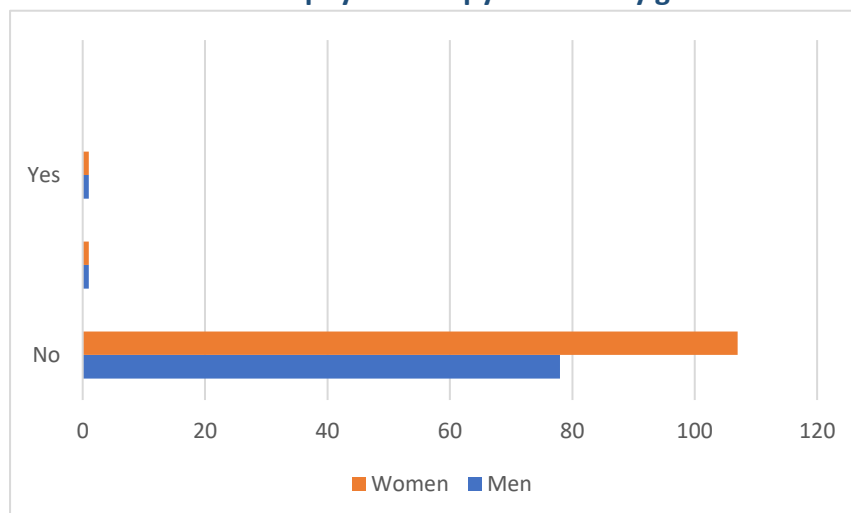
Next, disabled people were asked if they moved less because of their health condition. It turns out that 39.6% of them (30.4% men and 46.3% women) move less and need help. Meanwhile, 23.5% of them, although they move less, do not need help; this group includes 25 women and 19 men. About 34% of them (40.5% men and 28.7% women) report that other family members or neighbors help them to move.

In examining the availability of health services, it is evident that there are differences in access between genders. **For ambulance services**, 64.4% of men report access within 2 km, compared to 58.3% of women. Conversely, more women (43.5%) than men (36.7%) have access to ambulance services beyond 2 km. For hospital services, a similar trend is observed, with 82.3% of men and 80.6% of women having access to hospitals within 2 km.

For dental services, 89.9% of men and 89.8% of women report access beyond 2 km. Additionally, 2.5% of men and 4.6% of women report that dental services are not available. For ophthalmologist services, 79.7% of men and 71.3% of women report availability beyond 2 km, while 13.9% of men and 19.4% of women report that these services are not available.

Physiotherapy Services: For a distance of less than 2 km, 98.7% of men and 99.1% of women reported a lack of this service.

Chart 42. Existence of physiotherapy services by gender





Private Clinic Services: For a distance of more than 2 km, 64.6% of men and 68.5% of women reported availability. Additionally, 53.4% of men and 31.5% of women reported that private clinic services were not available. These data show differences in access to various types of health services and distances, with some services being more readily available than others closer to the respondents.

During the interview, 98% of women and about 99% of men reported that they do not have a center for people with disabilities within 2 km. Also, for a distance of more than 2 km, 75.9% (74.7% of men and 76.9% of women) reported no center that can help them. Regarding centers for adults with Down syndrome, 77.5% (78.5% of men and 76.9% of women) reported that such centers are not available.

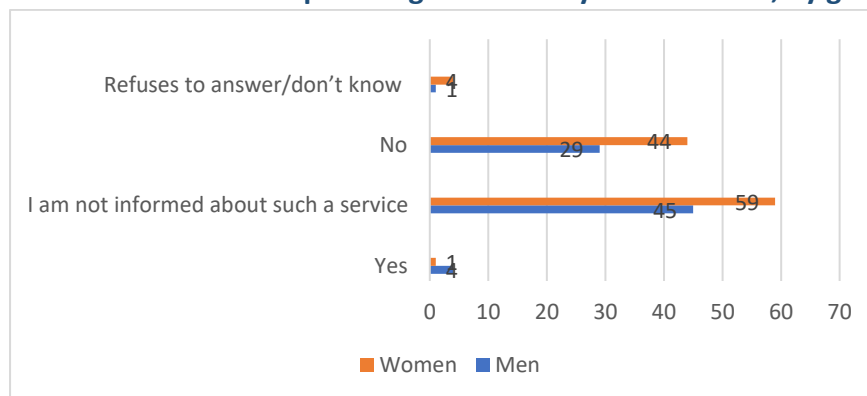
Among all interviewees, 21.4% (22.2% of women and 20.3% of men) take more than four medications a day and need help. Meanwhile, 46.5% (about 44% of women and 50% of men) report that family members or neighbors help them regularly to take their medication.

Additionally, men and women with disabilities in the municipality of Klos were asked how often they should be seen by a doctor. The results are listed below, broken down by gender:

- **About 1-2 times a year:** 71% of respondents (with no significant difference between genders) report this frequency.
- **Every month:** 26.2% of respondents, of which 25.3% are men and 26.9% are women.
- **Every week:** Only 3 disabled men reported this frequency.

Data on patronage services from medical personnel show that a higher percentage of men (5.1%) have used these services compared to women (0.9%). In contrast, a larger percentage of women (40.7%) report that they have not received patronage services, compared to men (36.7%). Additionally, a significant percentage of both sexes (57% of men and 54.6% of women) indicate that they have not been informed about this type of service. Overall, a noticeable portion of respondents have not used or are not informed about patronage services.

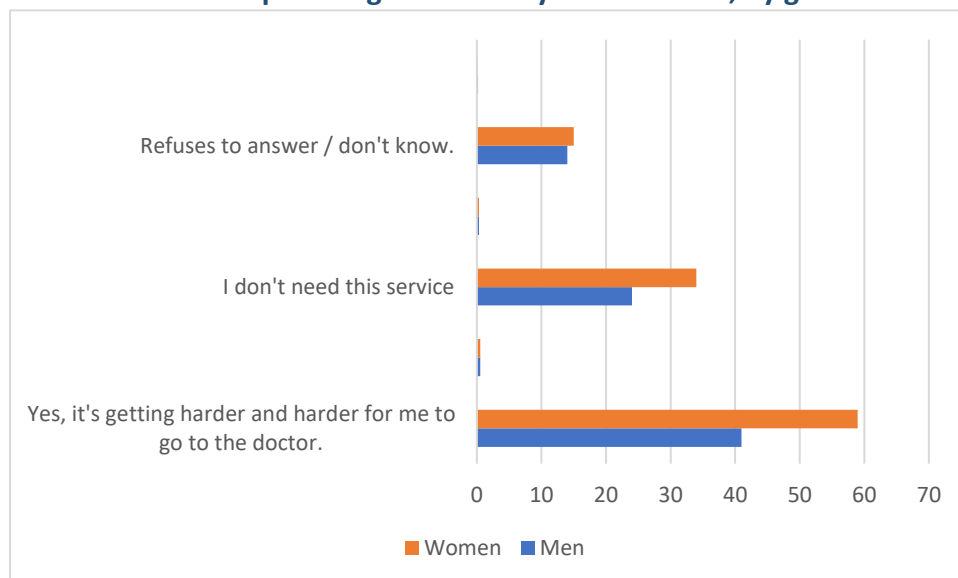
Chart 43. Provision of patronage services by medical staff, by gender



When asked if they receive any other personal services that include help and support to live independently and participate in the community, the data varies. More than half of the respondents (52.4%) do not receive such services, with 45.6% being men and 57.4% being women. About 25% are not aware of such services and do not know if they are offered (24% of men and 25% of women). Approximately 7% of the respondents, all over 65 years old, do not receive such assistance; this includes 4 men and 9 women. There are 25 people with disabilities in total (13.4%) who claim to have such assistance, with more men (22.8%) than women (6.5%).

The data related to the need for patronage services, such as having someone to visit, suggests that a significant proportion of respondents perceive accessing medical care as a challenge. 51.9% of male interviewees and 54.6% of female interviewees state that it is increasingly difficult to visit the doctor at health institutions. These findings highlight difficulties in accessing medical care for both sexes.

Chart 44. Need for patronage services by medical staff, by gender



The analysis regarding the receipt of all necessary health services by people with disabilities reveals that a majority of respondents, comprising 57% of men and 54.6% of women, indicate receiving all required health services. Conversely, 34.2% of men and 40.7% of women report not receiving all necessary health services, while some interviewees decline to answer or express uncertainty on this matter.

Further examination of the lack of health services for this demographic in Klos reveals several key points. Notably, 22.8% of men and 20.4% of women highlight the absence of most services. Among those identifying missing services, specialized medical professionals such as speech therapists, physiotherapists, ophthalmologists, dermatologists, and psychologists are cited as the most needed services, with 45.6% of men and 38.7% of women expressing this need.

Additionally, concerns about the availability of medications are raised, with 1.3% of men and 3.0% of women identifying shortages in this area. Other deficiencies include access to diabetic equipment, school accessories, and ultrasound services, albeit in smaller percentages. Furthermore, 21.4% of both genders express uncertainty about



the absence of services. These findings underscore the importance of addressing shortages in specialty medical services and access to medications to enhance overall healthcare delivery for people with disabilities.

The analysis of responses regarding various devices or aids that can improve the lives of disabled individuals yields interesting insights. A significant percentage, comprising 59.5% of men and 63% of women, use 'Digital blood pressure devices to measure pulse and alarm for taking medications' to facilitate daily life. Similarly, for aids such as 'Toilets for wheelchairs' and 'Wheelchairs,' the majority of respondents (23.8% of men and 15.8% of women) express a need for these aids.

The data also indicates a similar trend for other categories such as 'Waterproof chair/shower seat,' 'Personal emergency call system for health services,' and 'Magnifying reading glasses.' While a substantial number of interviewees did not select any option, indicating varying levels of interest in these aids, there is a clear need for organizing awareness and educational campaigns regarding the benefits of utilizing these support devices.

The analysis regarding the desire to have the ability to call for assistance with activities reveals interesting findings. The majority of responses, totaling 49.2%, express a positive inclination towards this option. Specifically, 50.6% of men and 48.1% of women indicate a desire to have the ability to call someone for help. This suggests a generally positive attitude towards accessing support opportunities or assistance services among respondents, highlighting the importance of these services in ensuring the well-being and safety of people with disabilities.

5.3.4 Assessment of Home Service Needs in the local community

The analysis from the interviewees regarding the daily need for certain devices for people with disabilities provides insights into their perceived needs across various aspects:

- **Hearing aid:** The majority of respondents, 93.6%, indicated that they do not use hearing aids daily. However, a total of 3.2% expressed a daily need for hearing aids, with no significant gender difference observed.
- **Cane or similar aid for walking:** About 35.3% of respondents reported a need for a cane or crutches to walk, with 38% being women and approximately 32% being men.
- **Wheelchair use:** Among the respondents, 84.5% stated that they do not need to use a wheelchair daily, while 9.1% reported this daily need. Of those who reported needing a wheelchair daily, 11.4% were men and 7.4% were women.
- **Assistance from others:** The majority, accounting for 56.1% of respondents, expressed a daily need for assistance from someone else. Additionally, approximately 8% of interviewed disabled individuals were undecided about this option, with 5% being men and approximately 10% being women.

The analysis of responses regarding the comparison of difficulties faced by disabled individuals in carrying out various activities sheds light on the challenges they encounter:



- For maintaining personal hygiene using the toilet and shower: 26.2% of the interviewed people reported that they face many difficulties, with 30.4% being men and 23.1% being women.
- For the preparation of food meals: 54.5% of the respondents reported that they face more difficulties, with 41.7% being women and 72.2% being men.
- Regarding self-feeding: 16.6% of respondents reported that they encounter difficulties with self-feeding, with 20.3% being men and 13.9% being women.
- For movement within the home: 14.4% of respondents reported that they encounter difficulties, without any significant difference between women and men.
- Regarding movement outside and recreational activities: 51.9% of respondents reported that they face more difficulties, with 45.6% being men and 56.5% being women.
- There are 63.1% of respondents (57% men and 67.6% women) who encounter difficulties in buying food and medicine.
- 77.5% of the respondents encounter difficulties in holding a dropped purse while shopping, with about 70% being men and 83.3% being women.
- There are 67% of men and 65.7% of women who report that they find it difficult to keep the house clean or do various repairs.
- Asked about going to the doctor, it turns out that 59.4% of them (54.4% men and 63% women) find it difficult to go alone.

Overall, the above responses highlight the challenges and needs of people with disabilities in various aspects of daily life and mobility. The following analysis provides data on the support that disabled people receive in their daily activities. From the answers, it was seen that 24.6% of the total receive help from different family members. It is the respective spouses (in the case of people with disabilities who are married) who assist in 27.8% of cases, with 30.4% being men and 25.9% being women who affirmed this fact. In 11.8% of cases, it is the children who help them in their daily activities. In a general analysis, it turns out that it is the close family that helps people with disabilities in their activities.

Below is an analysis of how people with disabilities usually go to the doctor, pharmacy, supermarket, etc., and the results of this survey are presented as follows:

To go to the doctor, people with disabilities use several alternatives. About 10% of them walk (9% men and 11% women); by car, about 26.7% of them make this trip, without any significant difference between the sexes. There are about 24% of them who use public transport (25% of men and 23% of women), and there are about 38.5% of the total interviewed who report that there are other people who accompany them, of which 39% are men and 38% are women.

To go to the pharmacy, people with disabilities use several alternatives. About 4.3% of them walk (3.8% men and 4.6% women); by car, about 19.8% of them make this trip. There are about 28.3% of them who use public transport (26.6% of men and 29.6% of women), and there are about 32.1% of the total interviewed who report that other people are accompanying them, of which 39.2% are men and about 27% are



women. Interestingly, there are about 15.5% of all interviewees who never go to the pharmacy to get their medicines.

The situation for **going to the supermarket** is almost at the same levels; bank; post office, etc., depending more on the company of other people or even never visiting these institutions.

The study also looked at the average time it takes people with disabilities to get to various destinations, including doctor's offices, hospitals, pharmacies, banks, and stores. The responses received range from 3 minutes to 99 minutes, depending on the means of transport and the distance of travel. In summary, we look at transport preferences and travel times among people with disabilities, highlighting the importance of accessibility and logistics for accessing various services and environments important to them.

Analysis of the demand for help with various home repairs over the past 12 months, broken down by gender of respondents, reveals some important patterns. There are 87% of respondents who turn to their family for this service (86.1% of men and 88.9% of women). Meanwhile, requests for help from cousins, organizations, etc., account for only 2% in total. Approximately 7.5% of disabled people in the municipality of Klos have no one to turn to for help, regardless of gender.

Through the analysis of the answers related to the people or institutions where disabled people would seek support if their health condition worsened, interesting patterns emerge:

- **Family Members:** 94.9% of men and 97.2% of women with disabilities would seek support from family members.
- **Cousins:** 8.9% of men and 12% of women indicated that they would seek help from cousins.
- **Neighbors and Friends:** While most people with disabilities did not choose this option, only 2.7% of the total did, with more women (4) than men (1) choosing this option.

Values of selecting the option for assistance from the social center, Red Cross, civil society organizations, religious institutions, and similar have a negligible selection margin. Following this, out of the 187 individuals interviewed near the Klos municipality, only 1 female reported that she did not need help.

In conclusion, although there were differences in the preferences for sources of support between women and men with disabilities, both groups mainly expressed the need for help from various sources if their health condition worsened.

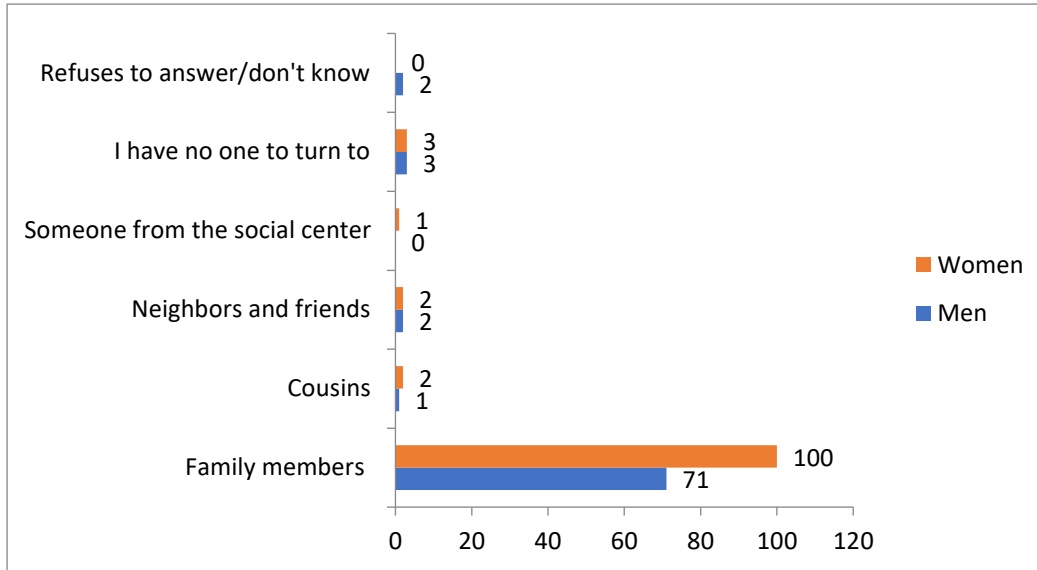
Regarding the question of whether individuals have someone to talk to about their problems, especially in their current situation, significant gender differences are observed across different relationships:

- 91.4% of responses generally indicated that they have someone to talk to in the family. Females reported slightly more at 92.6%, while males reported slightly less at 89.9%.

- An even distribution, with 16% of responses having someone to talk to among relatives.
- About 2.1% of respondents have someone to talk to among neighbors and friends. Females reported slightly lower at 1.9%, while males reported slightly higher at 2.5%.

Analyzing the data from the responses, while a majority of responses have someone to talk to in the family and among relatives, significant differences exist for other institutions or individuals.

Chart 45. Person you talk to by gender

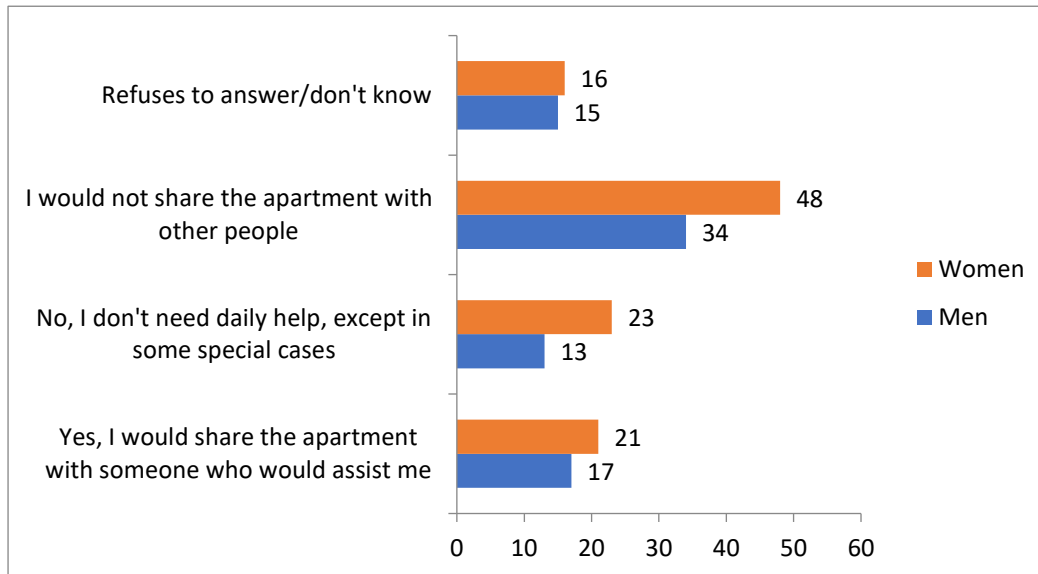


In response to the question of whether individuals would like help from someone else when their usual helpers are not available, 66.3% express the desire to have someone else to ask for help, with a slightly higher proportion among men (67.1%) compared to women (65.7%). At the same time, 4.8% indicated that they can manage everything by themselves, with a slightly higher percentage among men (5.0%) compared to women (4.6%). Additionally, 25.1% stated that they would wait until their usual helpers were available before asking for help from others, with a higher percentage among women (25.9%) compared to men (24.1%).

There are 43.9% of the respondents who would like to have someone take care of them at home, with 41.8% of the answers coming from men and 45.4% from women. Meanwhile, about 43% state that they receive help from relatives, without any significant difference between the sexes.

Regarding sharing the space with someone who would help in daily activities, 20.3% expressed their willingness to do so, with slightly lower percentages among women (19.4%) compared to men (21.5%). On the other hand, 19.3% said that they do not need daily help except in certain cases, with different percentages between the sexes: 16.5% for men and 21.3% for women. Likewise, 43.9% claimed that they would not share their living space with others, with an almost equal percentage between men (43%) and women (44.4%). These findings help us understand that a different approach has begun for people with disabilities who appreciate home care.

Chart 46. Sharing the apartment with someone for personal assistance



Regarding the emotional state and mental well-being of these individuals, we have data indicating that 34% of the interviewees feel alone, with 27.8% being men and 39.8% being women. Meanwhile, 41.2% of those interviewed affirm that they feel good, comprising 50.6% of men and only 34.3% of women. It's notable that 21.5% of men and 25.9% of women either do not know how to answer or refuse to respond, suggesting a potential correlation with feelings of depression related to their health situation.

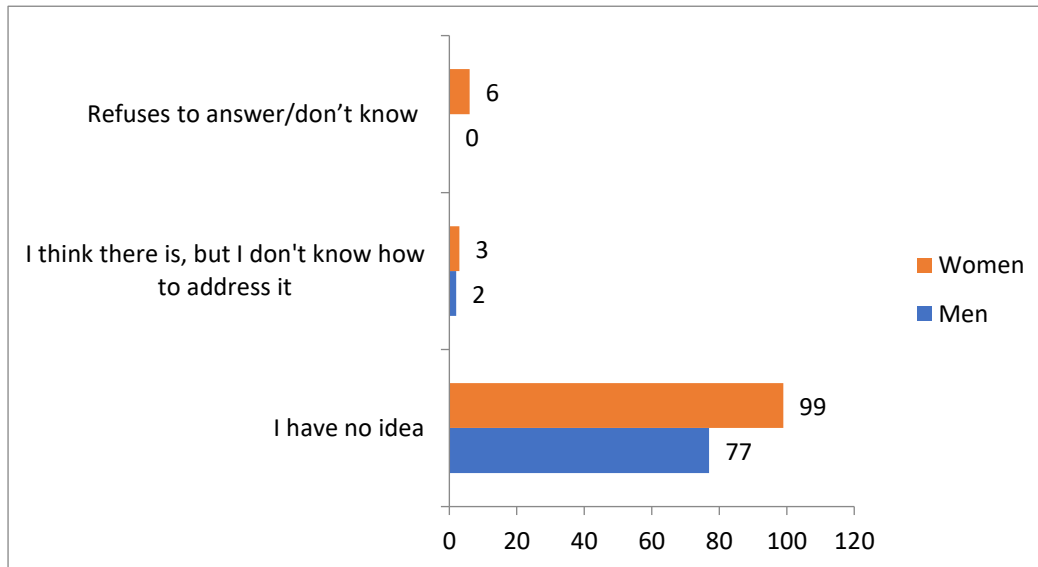
When asked if they need an alarm system through which they can call for assistance if they don't feel well (especially in cases where the person lives alone), 25.1% expressed readiness, with 19% being men and 29.6% women, while 49.7% rejected the idea, comprising 53.2% men and 47.2% women.

5.3.5 Assessment of social service needs in the local community

In this study, the need of people with disabilities for social services in the local community was also analyzed. Below are key data by question broken down by gender.

When asked if there is a place to go to in the municipality if they need a short-term stay in a daycare center, a total of 94.1%, with 97.5% being men and 91.7% being women, answered that they have no information if such a place exists. Meanwhile, there is a 2.7%, equal for both sexes, who think there is such a center but don't know how to access it.

Chart 47. Existence of a center for short-term stay

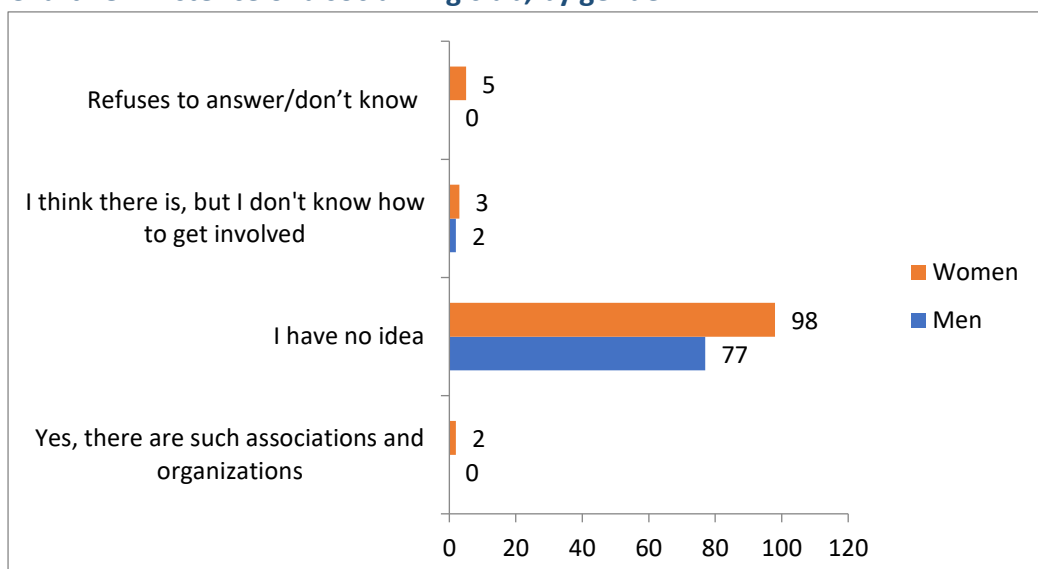


For the question of whether they used the services of a day care center (even outside of Klos municipality), 96.8% of all participants reported that they did not, with a slightly lower percentage of men (96.2%) compared to women (97.2%).

25.1% of respondents state that they would often use these services if they existed, with a slightly higher percentage of women (27.8%) compared to men (21.5%). Additionally, 39% indicated that they would use them, but rarely, with men being more positive at about 45.6% compared to 34.3% of women.

When asked if there are clubs and organizations in the municipality that provide socialization, entertainment, and recreation for people with disabilities, 93.6% said they were unaware of the existence of such clubs, with more males (97.5%) than females (90.7%) falling into this category.

Chart 48. Existence of a socializing club, by gender



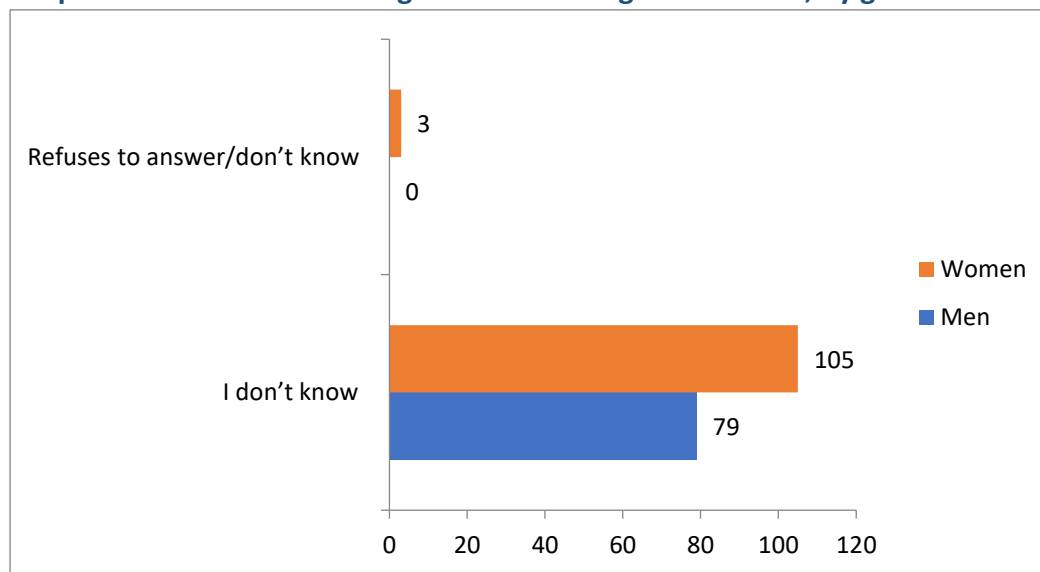
When asked if such clubs would exist, 31% of respondents said they would use them often because they need them, with men (29.1%) and women (32.4%). Meanwhile,



about 36.4% of them (42% men and 32% women) declared that if these services existed, they would use them but rarely. Approximately 22.5% of respondents, with more women (26.9%) than men (16.5%), did not express the desire to use such social clubs.

Regarding the question of whether there is a soup kitchen in the municipality, where food is served and delivered to vulnerable categories of citizens, 98.4% answered that they do not know, with 100% of men and 97.2% of women being unaware. To continue, in response to the question of whether they would use such services if they existed, 27.3% declared that they would use them often, with 27.8% being women and 26.6% being men. Additionally, of those who would rarely use it, there is a total of 38.5%, with 44.3% being men and 34.3% being women.

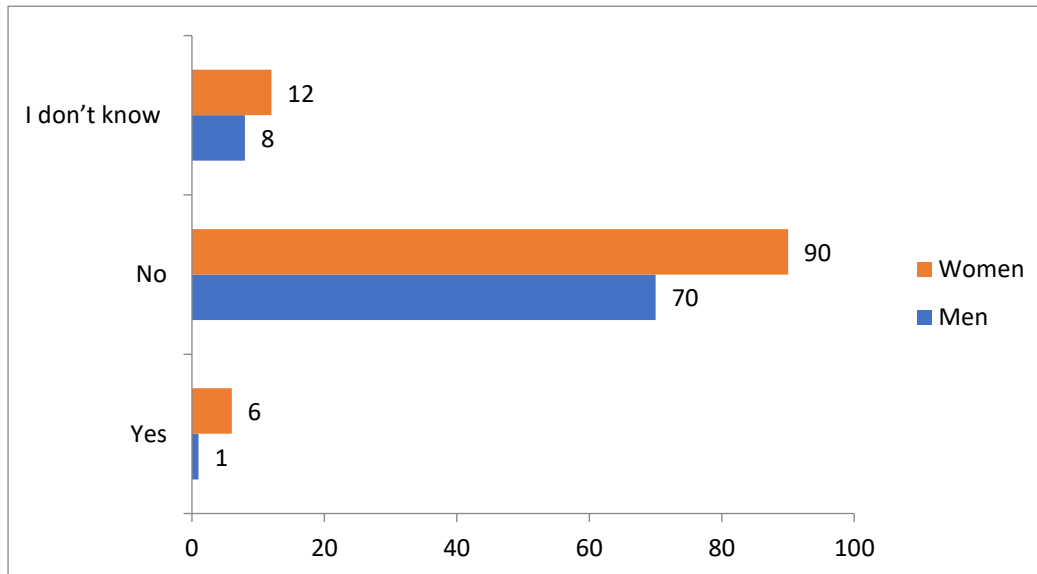
Graph 49. Existence of nursing homes for categories in need, by gender



When asked how they would prefer soup kitchen services, if they existed, 58.3% mentioned that they would like food delivered to their home several times a month, with 57% being men and 59.3% being women. However, some claimed that they would like to go themselves to the canteen where food is served, totaling 23%, of which 25.3% were men and 21.3% were women.

The provision of organized transport services to ambulances, care centers, clubs/associations, or other community centers in the municipality received a response from 3.7% in total who affirmed the receipt of such a service; while 85% denied having received such a service. Among them, 8.9% were men with disabilities, while 10.1% were women with disabilities. Additionally, about 10.1% stated that information about these services is missing.

Chart 50. Existence of transport organized by gender



According to the information gathered in the municipality of Klos:

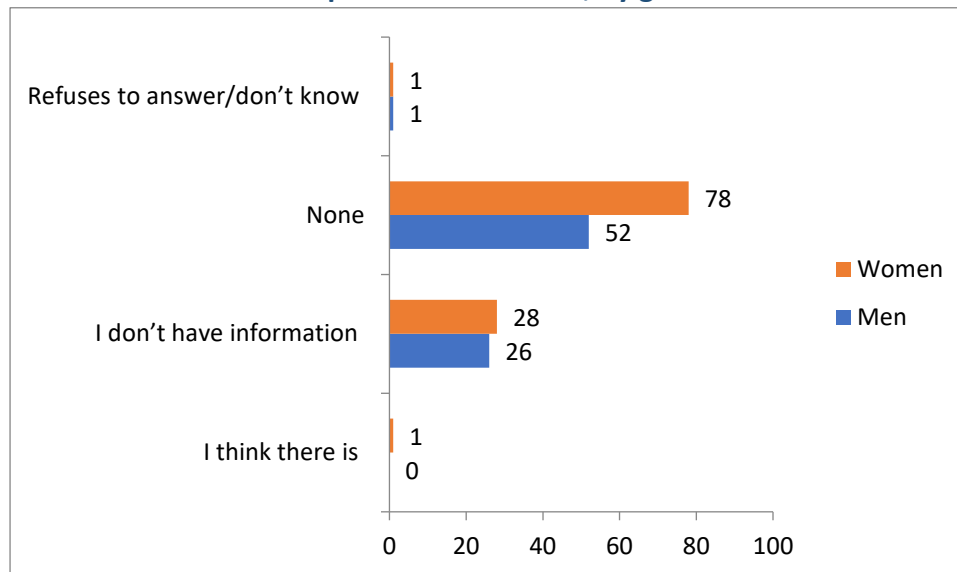
- 77.2% of men and 73.1% of women expressed the need for organized transportation to go to health centers or to the doctor.
- 81% of men and 84.3% of women express the need for organized transport to hospitals.
- 36.7% of men and 42.6% of women express the need for organized transportation to day care centers.
- 35.4% of men and 36.1% of women express the need for organized transportation in social service centers.
- 26.6% of men and 23.1% of women express the need for organized transportation in Red Cross centers.
- 20.3% of men and 21.3% of women express the need for organized transport in recreational activities.

Related to the questions about the availability of institutions in the municipality that provide daily care for elderly or sick people, we received answers ranging in negative connotations. There are 67.4% of the total number of people interviewed deny the existence of such an institution, of which 65.7% are women and 69.6% are men; 32.1% of people with disabilities have no information and idea about the existence of such an institution, of which about 19% are men and 34.3% are women. There is only one person who thinks that such an institution exists, but when asked to identify it, he had no idea. If they were available, 18.2% responded positively, expressing a strong willingness to use these social services very often, with 19% being men and 17.6% women choosing this option. Meanwhile, approximately 48.7% indicated they would only utilize these services when in need, with a 10-percentage-point difference in favor of men. Additionally, about 33.3% of women and 22.8% of men stated they would not use these services even if they were available.

If there is an institution in the municipality offering care and professional support for food, clothing, and healthcare in case a person lacks the conditions for independent

living, a total of 69.5% say there is none, with 65.8% being men and 72.2% being women; while 28.9% in total are uninformed, with 32.9% being men and 25.9% being women.

Chart 51. Existence of a professional center, by gender



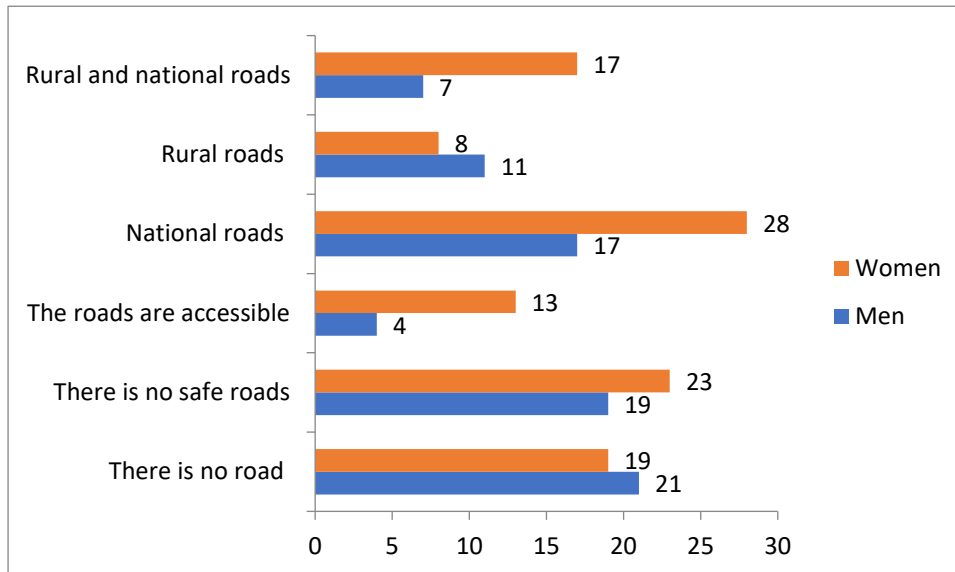
Asked if they would use the services of such a center if it existed, 64.2% of respondents would use these services several times or when they needed help. Among them, 67.1% of men would prefer it more compared to women.

In assessing financial compensation for housing and care in institutions serving people with disabilities, we learned that 51.3% of respondents reported that they were not required to provide financial compensation for these important services. On the other hand, a substantial majority affirmed that they have not used the services offered by these institutions, with about 43.3% of whom 44.3% are men and 42.6% are women.

People with disabilities were also asked about the existence of an active telephone number (SOS line) within the municipal administration for emergencies, where only 14.4% of respondents reported the existence of an SOS line in the municipality of Klos. Additionally, 12.8% stated that they need it because of their health condition, even though the SOS line does not exist. In contrast, 26.7% stated that they do not need an SOS line, showing different perspectives. A significant proportion (46%) either refused to answer or were unsure of the existence or need for an emergency telephone line.

Regarding accessible roads for people with disabilities who do not have any obstacles in terms of mobility, a total of 21.4%, of which 26.6% are men and 17.6% are women, answered that there is no road. Meanwhile, 22.5%, of which 24.1% are men and 21.3% are women, said that there are no accessible roads at all. Additionally, there are a total of 24.1% who claim that it is the national roads that provide access for people with disabilities.

Chart 52. Road accessibility for people with disabilities



Obtaining the opinion from this category for the improvement of their mobility resulted in a total of 40.6% who require the adjustment of the infrastructure. Additionally, a total of 32.1% are for the improvement of health services. Moreover, a total of 9.6% require the improvement of rural roads to be able to access services in municipalities or urban centers. Furthermore, 1.6% requested the placement of ramps for easy access to buildings where various services are offered. Lastly, 1.1% have requested ophthalmologist services, and these are women.

The following data provide us with information regarding access to various institutions for people with disabilities:

- **Hospital/Health Center:** 81.3% of respondents reported adequate access, with a lower proportion of women (79.6%) than men (83.5%).
- **Court:** 14.4% affirmed in total to have the right access, with 12% women and 17.7% men.
- **Supermarket:** 61% reported adequate access, with a much lower proportion of women (57%) compared to men (67.1%).
- **Municipality Building:** 41.7% claimed to have proper access to the municipal institution, with 41.8% men and 41.7% women.

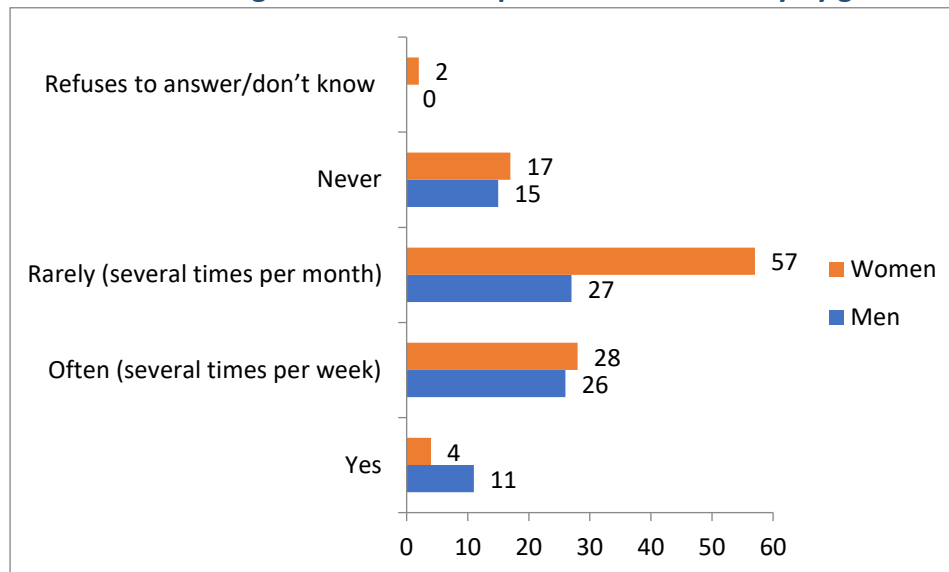
These findings help us understand the variations in perceived access across different institutions, with gender differences observed in some cases. This underscores the importance of tailored interventions to address these differences and ensure fair access for all people with disabilities.

5.3.6 Assessment of the views and needs of people (+18 years old) with disabilities

People with disabilities were also asked if they followed the latest developments in the country to understand their views and needs. Only 8% of the total respondents reported following these developments every day, with men comprising the highest percentage at about 14%, compared to 3.7% of women who chose this option. Meanwhile, 33% of men and 26% of women follow the latest developments, particularly through news editions, several times a week. Almost 45% of respondents

rarely follow these developments, with women (52.8%) mostly choosing this option, compared to 34.2% of men. Additionally, 19% of men and 15.7% of women reported never following the latest developments in the country.

Chart 53. Following the latest developments in the country by gender



Next, people with disabilities were also asked if they have information on the adoption of policies at the local level. Only 3.7% of them affirmed this fact, with 5.1% being men and 2.8% women. Meanwhile, about 47% of the men and 45.4% of the women interviewed stated that in the last three years, no policies have been approved at the local level. Interestingly, more than half of the interviewees (50.3%) refused to answer or did not know whether policies had been adopted, with the difference between genders changing by only 4 percentage points in favor of men.

Regarding the actions that people with disabilities or their family members have undertaken to advocate for their interests, the data are analyzed below by gender:

- A total of 2.7% have met with the MPs of the area, with 5.1% being men and 0.9% being women.
- A total of 15.5% have met with members of the municipal council, with 24% being men and 9.3% being women.
- A total of 12.8% have met with the mayor of the city council, with 17.7% being men and 9.2% being women.
- A total of 29.9% have met with the mayor, with 36.7% being men and 25% being women.
- Only 2 disabled men participated in the protest.
- The petition was signed only by a male with disabilities.
- While 55% of respondents affirmed that they did not take any action, with 51.8% being men and 57.4% being women, 16.6% of respondents refused to answer or did not know

Regarding trust in different institutions, these are the main findings from people with disabilities, broken down by gender:



- **Trust in the institution of the President:** 8.6% of the responses indicated trust, with 10.1% of men and 7.4% of women.
- **Trust in the Government:** 17.1% of respondents expressed trust, with 20.3% of men and 14.8% of women.
- **Confidence in the Mayor:** 40% of responses showed confidence, with 43% of men and 38% of women.
- **Trust in Public Institutions of Local Government:** 24.6% of responses indicated trust, with 27.8% of men and 22.2% of women.
- **Confidence in the Police:** 21.9% of responses showed confidence, with 30.4% of men and 15.7% of women; while a total of 8.6% expressed no confidence.
- **Trust in NGOs:** 10.7% of respondents indicated trust, with 19% of men and 4.6% of women.
- **Faith in Religious Institutions:** 27.8% of responses showed faith, with 32.9% of men and 24.1% of women.

People with disabilities were also asked what the priorities of the Municipality of Klos should be, which are presented below divided by gender:

- **Education:** 65.8% of respondents selected education as a priority, with 65.8% males and 65.7% females.
- **Health Care:** 94.1% of respondents chose health care as a priority, with 96.2% men and 92.6% women.
- **Supporting People with Disabilities:** 98.4% of respondents prioritized supporting people with disabilities, with 98.7% males and 98.1% females.
- **Housing:** 74.9% of respondents prioritized housing, with 73.4% males and 75.9% females.
- **Aid to the Poor:** 94.1% of respondents selected aid to the poor as a priority, with 93.7% men and 94.4% women.
- **Protection of the Environment:** 66.3% of respondents chose this priority, with 63.3% men and 68.5% women.
- **Public Infrastructure:** 94.1% of respondents prioritized public infrastructure, with 92.4% males and 95.4% females.
- **Drinking Water Supply:** 72.2% of respondents prioritized this, with 68.4% men and 75% women.

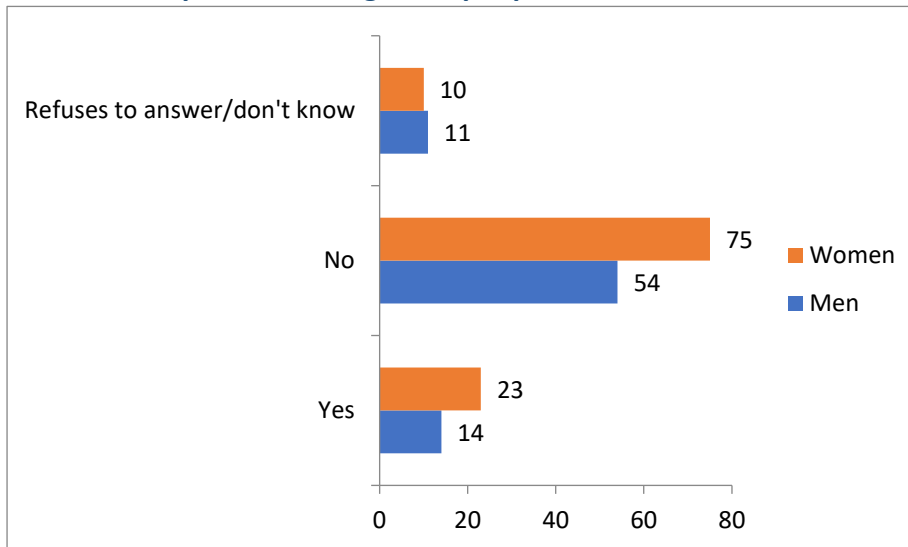
Meanwhile, in the following, only 24.6% of the interviewed group affirmed that they have connected with other disabled people near the municipality of Klos, comprising 26.6% men and 23.1% women. Additionally, only 4 people with disabilities (2 men and 2 women) were aware of any association representing people with disabilities, but none knew if the association had undertaken any initiatives in the municipality regarding their needs.

5.3.7 Discrimination – Risk Factor

In terms of respect for human rights and the rights of people with disabilities, we found that 19.8% comprising 17.7% of men and 21.3% of women affirm that they feel

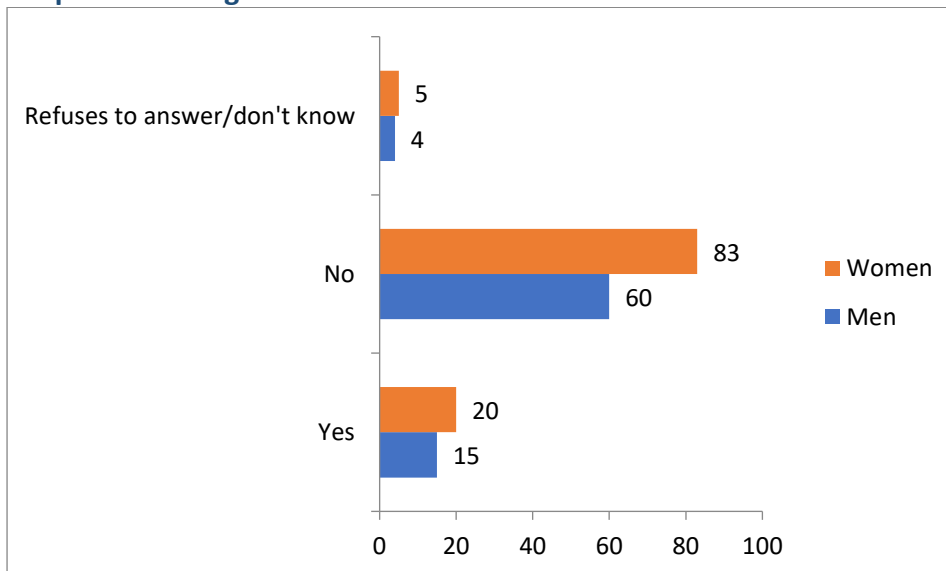
respected. Conversely, 69% with 68.4% of men and 69.4% of women believe that the rights of people with disabilities are not respected in the country.

Chart 54. Respect for the rights of people with disabilities



Next, the respondents were asked if they had felt discriminated against during the last 12 months, with 18.7% affirming this fact. Among them, 19% were men and 18.5% were women. This contrasts with a total of 76.5%, of which 75.9% were men and 76.9% were women, who stated that they had not felt discriminated against during the last 12 months in the municipality of Klos.

Graph 55. Feeling of discrimination in the last 12 months



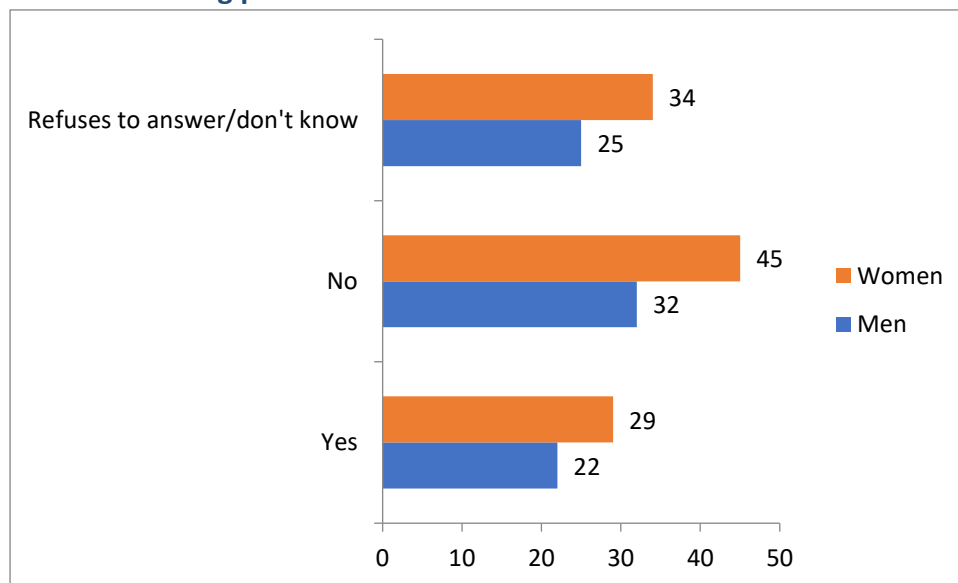
About 95% of respondents affirm that they have never reported an act of discrimination to the Ombudsman, the Helsinki Committee, Free Legal Aid, the Commissioner for Protection from Discrimination, or the Department for Equal Opportunities in Klos Municipality. This is in contrast to about 1.5% who have reported several times to the aforementioned institutions, and approximately 3.5% who

refuse to answer. When asked about the outcomes of these reports, some respondents did not provide definitive answers, raising doubts about whether they had reported the incidents to the aforementioned institutions.

Usually, people who have experienced discrimination in the last 12 months claim that they felt discriminated against at work (in three cases involving women), in two cases during job applications (involving 1 female and 1 male), and in the ambulance or hospital, where about 28 people with disabilities felt discriminated against at least once or sometimes, including 4 men and 14 women. Public transport appears to be the second most common location for discrimination against people with disabilities, with 52 instances reported (23 involving men and 29 involving women). The majority of respondents highlight discrimination in their interactions with other people, with 27 men and 33 women reporting such instances.

Furthermore, disabled people were asked if they felt protected in situations where their rights could be deprived and they could be discriminated against because of their condition. Approximately 41.2% (without any significant difference between genders) feel that they are not adequately protected, compared to 27.3% who feel protected..

Chart 56. Feeling protected from discrimination



5.3.8 Vulnerability to shocks – Risk Factor

The data from the interviews regarding the impact of the emergence of the new virus, such as Covid-19 on daily activities provides information categorized according to different statements and the gender of people with disabilities.

During that period, 72.2% of men and 69.4% of women declared that they did not leave the house because they were afraid and were trying to protect their health. 64.2% of respondents declared that the appearance of the virus affected their daily activities and those of their family members. Additionally, 51.3% of respondents claimed that the pandemic affected their mental health.



A total of 32.1% claimed that during that period they lost contact with relatives and friends by self-isolating, against a total of 65.2% who did not agree with this statement. Furthermore, 87.7% (89.9% men and 86.1% women) claimed that they had more expenses, while 85.6% stated that their expenses increased a lot during that period, with both genders nearly equal.

84% of respondents stated that their income was not sufficient during the pandemic. Following this, 73.8% of the respondents stated that they have no savings that they can use to solve the current problems caused by the coronavirus situation, with an equal distribution of gender participation.

Additionally, 42.2% of them stated that they took out debts to cope with the financial situation as a result of the coronavirus, of which 39.2% are men and 44.4% are women who took out debts.

The question section on interviewees' perception of security provides information categorized by different statements and their gender. Thus, 1.3% of men and 4.6% of women declared that their neighborhood is not safe at all, and they are afraid to live there, compared to 94.9% of men and 93.5% of women who declared that their neighborhood is safe.

Following this, 23.5% of the respondents (25% women and 21.5% men) stated that they needed additional security equipment to feel safer (such as cameras, better locks, lights with sensors, and alarms). Additionally, 77% of respondents (77.2% male and 76.9% female) stated that the police should patrol the area more often.

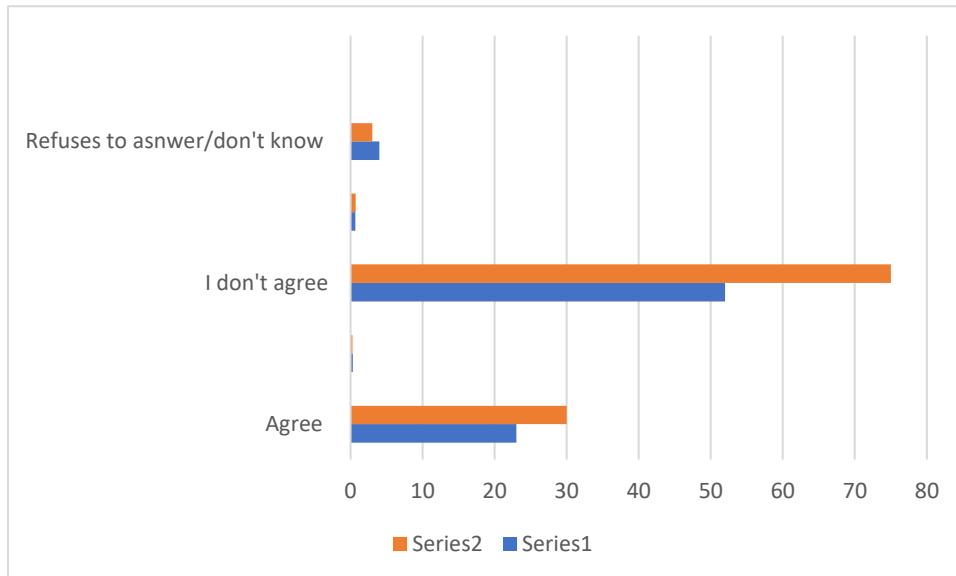
The following information presents responses to whom individuals would turn for help in the event of a disaster (earthquake, flood, fire), segmented by gender.

- A total of 54.5% affirmed that they would turn to their children or grandchildren for help, with 58.2% being male and 51.9% female.
- 41.7% of the interviewees indicated that they would seek help from friends, divided into 38% women compared to 46.8% men.
- 51.9% of them, with an equal percentage between women and men, declared that they would rely on the local authorities - the municipality, for help.
- About 26.7% of the interviewees hope to be supported by humanitarian organizations such as the Red Cross for help, with a slightly higher percentage among women (26.9%) compared to men (26.6%).
- About 1.6% of those interviewed said they do not need help, with a higher percentage of 1.9% women compared to 1.3% men.

Regarding the statement that people with higher incomes and professions with higher status have more opportunities to be protected because they have connections with public hospitals for faster treatment, a total of 74.9% agreed, with 77.2% being men followed by 73.1% women.

Regarding the statement that every citizen of the country has the same opportunity to receive the necessary treatment, a total of 28.3% responded positively, divided into 29.1% men and 27.8% women.

Chart 57. Equal treatment opportunities, by gender



Regarding how disabled people and their families are neglected: About 69% of the interviewees agree with this statement, divided into 67.1% men followed by 70.4% women. While 47.6% agree with the statement that the state has not forgotten them, but it is the local government that takes care of people with disabilities, affirmed by 44.3% of men and 50% of women.

6 Focus Group Analysis – People with Disabilities

From the social mapping, the municipality of Klos identified 75 children with disabilities. According to the model, interviews were conducted with 45 of these children’s parents or guardians, divided into urban and rural administrative units. Additionally, 783 adults with disabilities were identified near the municipality of Klos, of which 187 were interviewed, also divided into urban and rural administrative units.

From the focus groups with disabled people, the following issues were identified:

- There is a lack of social services for people with disabilities.
- There is a lack of access to health services for this targeted group.
- There is a lack of educational services for people with disabilities, whether they are children or adults.
- There is a lack of daycare center for people with disabilities

According to the data obtained from these discussions, and supported by the stakeholder discussion group, a significant problem is that parents often do not want to declare their children as disabled. This mentality leads to a lack of support services for these children, negatively affecting their social inclusion, emotional, and social development.

There are no support institutions that provide accommodation services for differently-abled children or adults, nor day centers that can provide therapy or physiotherapy. This community faces the same problems at all age stages due to the lack of services and institutions that provide these services.



It is noted that the municipality offers economic assistance and disability payments to children and adults without any restrictions, as long as they declare and register in the system to benefit from these aids. This also applies to guardians of disabled people.

The health service presents significant challenges in providing services for this category, including a lack of therapy, physiotherapy, specialist doctors, state-reimbursed medications, and transportation to the hospital and necessary services, even those at long distances from the municipality of Klos.

Although education appears more complete in terms of services, there are still major deficiencies in the schools of Klos municipality. Only the high school in Klos has ramps, while the other schools do not, making it difficult for children with disabilities to access the education system. Other challenges include a lack of special bathrooms for girls with disabilities, didactic tools, and classrooms for developing learning, which constitute a great challenge for people with disabilities.

Other findings from the focus group discussions:

- The economic situation is very difficult, and the income is not sufficient to provide adequate care for the disabled.
- Mothers of children with disabilities find it impossible to work because they must care for their disabled children as well as other children.
- It is not rare for families to have more than one member with disabilities, making it very difficult to cope, especially as many live in extreme poverty.
- Receiving services, whether social or health, remains a significant obstacle since they are lacking in the Klos municipality and nearby municipalities.
- There is a marked lack of specialist doctors in all fields.
- Public transport, including private transport, lacks friendly logistics for people with disabilities.
- Family members of people with disabilities receive economic assistance from the municipality, but they still struggle to cope with daily living.
- All participants in the focus groups were unemployed because they were either caregivers (parents) of children with disabilities, other family members or disabled people themselves.
- Adequate access for people with disabilities is missing in almost all institutions, except for the Klos municipality building, which has ramps at the main entrance.
- In the municipality of Klos, there has not yet been a real intervention to make roads or intersections easily accessible for people with disabilities.
- People with disabilities require more services and welcome the idea of creating a day center that can provide alternating services for both children and adults with disabilities.
- Families living in rural areas far from the center do not have access to health services or help for their family members with disabilities. They do not receive services but wait for the integrated service provided by the mobile team to benefit from any support.
- More assistance and specialized teachers are needed for children with disabilities who attend schools and kindergartens.

In the municipality of Klos, no institution provides care and professional support for food or clothing, whether public or private. All participants agreed that a SOS line in the municipality would be a very good opportunity that is currently missing. However,



they appreciated the fact that social and medical service workers occasionally visit to check on their needs and provide an individual phone number for emergency services.

No center in the municipality offers short-term stays for people with disabilities, including those without support. This significant lack of services was highlighted by every person interviewed, both in groups and individually..

7 Conclusions and Recommendations

Based on the main findings of the Social Mapping for people with disabilities near the municipality of Klos, the following conclusions are drawn:

- **Rural Concentration:** The high concentration of people with disabilities in the rural areas of Klos municipality indicates a clustering of this group in small communities, with limited access to services and opportunities for social integration.
- **Economic Assistance:** Nearly all people with disabilities rely on economic and financial assistance from the municipality, highlighting their significant dependence on public support for meeting basic needs.
- **Access to Basic Infrastructure:** While access to potable water, electricity, and basic household facilities is satisfactory, the lack of access to the Internet and technological devices restricts their opportunities for education, employment, and communication.
- **Food Insufficiency:** A notable percentage of people with disabilities, including children, face food insufficiency, underscoring the need for additional support in this area.
- **Income and Employment:** Low monthly income and limited employment opportunities reflect a challenging economic situation, with many disabled individuals and their families struggling to meet daily needs.
- **Lack of Specialized Services:** Despite municipal efforts, there remains a shortage of specialized social and health services, including day care centers, crucial for enhancing the quality of life for people with disabilities.
- **Transportation and Access to Services:** The absence of organized transportation and the considerable distance from specialized services pose challenges for people with disabilities in accessing necessary care.
- **Family Care and Support:** Family members, particularly mothers, are primary caregivers, underscoring the need for additional support for family caregivers.
- **Housing Conditions:** Many residences do not meet living standards, highlighting the necessity for infrastructure improvements and adequate housing.
- **Lack of Organizations and Social Events:** The absence of social events and activities hampers the social integration of people with disabilities in society.
- **Discrimination and Trust in Institutions:** Instances of discrimination and low trust in central institutions point to the necessity of raising awareness and improving relations with public institutions.



- **Lack of Support from Civil Society:** The absence of civil society organizations in the municipality of Klos signifies a significant gap in the support and integration of people with disabilities in the community.

These conclusions underscore the importance of an integrated and coordinated approach to improve the situation of people with disabilities in the municipality of Klos. Some key steps that can be taken to address these issues include:

- **Development of Specialized Services:** Invest in the creation of specialized social and health services within the municipality, including day centers and facilities for temporary stays.
- **Improving Infrastructure and Basic Services:** Expand access to the Internet and technological devices, enhance living conditions, and develop organized transportation services that cater to people with disabilities.
- **Economic Support and Employment:** Create opportunities for sustainable employment and vocational training for people with disabilities and their caregivers. Provide sufficient financial assistance to cover their basic needs.
- **Support for Family Caregivers (guardians):** Provide support to family caregivers through assistance programs, training, and respite services.
- **Fight Against Discrimination:** Implement public awareness and education programs to reduce discrimination and promote inclusivity.
- **Support from Civil Society:** Encourage the creation and development of civil society organizations that provide support and help in the social integration of people with disabilities.
- **Increase in Social Activities and Events:** Organize events and activities that facilitate socialization and integration of people with disabilities into the community.
- **Strengthening Trust in Institutions:** Improve transparency and communication from public institutions. Foster closer cooperation with local communities to build trust and provide better services.

Implementing these measures will enhance the quality of life and integration of people with disabilities in the municipality of Klos, ensuring more equitable access to opportunities and services.

Recommendations according to risk factors:

Recommendations for improving socio-economic status (LNOB – risk factor)

- **Interaction with Regional Employment Office:** The municipality of Klos should interact with the regional employment office so that at least one of the parents/guardians of children with disabilities is employed, thus increasing the family's economic income. Similarly, they should explore the possibilities for implementing Law No. 15/2019 on the promotion of employment, which emphasizes the employment of people with disabilities.
- **Enhancement of Social Services:** Prioritize the enhancement of social services for all people with disabilities to ensure their holistic well-being.
- **Review of Caregiver (guardians) Support Policies:** The Government of Albania should review policies regarding the support of caregivers of



children with disabilities to recognize their years of care for family members, which should contribute to their old age pension.

- Review of Financial Assistance Policies: Review financial assistance payment policies, such as those from the Medical Commission for the Assignment of Ability to Work (KEMPC), for people with disabilities. Specifically, address subsidies for mothers of children with disabilities who often cannot pursue employment due to caregiving responsibilities.
- Expansion of Social Services Basket: Expand the basket of social services, offering an integrated package of services for families, particularly focusing on people with disabilities.
- Economic Empowerment through Social Fund: Empower people with disabilities economically through initiatives such as the Social Fund.
- Comprehensive Basic Healthcare Package: Design a comprehensive basic healthcare package tailored to the specific needs of people with disabilities. Ensure that staff are adequately trained to provide services, including those by specialists currently lacking in Klos.
- Expansion of School Health Services: Expand the roles of school nurses and dentists to serve the disabled community within their respective areas of practice and training.
- Cooperation with Disability Assessment Commissions: Foster cooperation with Multidisciplinary Disability Assessment Commissions in the municipality of Klos to support and assist people applying for Disability Payment.
- Provision of Mobility Services: Provide mobility services to support all people with disabilities in the family according to their specific needs.

Recommendations related to geography (LNOB – risk factor)

- Administrative units, in cooperation with health centers and social services, must act to correctly identify the number of people with disabilities.
- Establishment of services and programs for people with disabilities who live in rural areas.
- The municipality of Klos should undertake information campaigns for families of children with disabilities regarding their diagnosis, especially in rural areas and those far from the city.
- Dissemination of information for people with disabilities who live further from the city center and in deep rural areas.
- Establishment of psycho-social services for people with disabilities in rural areas.

Recommendations regarding governance (LNOB – risk factor)

- Klos Municipality, in cooperation with other support actors for people with disabilities, should undertake awareness campaigns for parents who do not follow their children's medical check-ups to identify disabilities.
- Promotion and establishment of programs for people with disabilities.
- Health services for people with disabilities should be accessible near their places of residence, especially for those living in remote rural areas.



- All administrative units and/or schools operating in this municipality appear should be equipped with sensory rooms.
- Creation of mechanisms for monitoring and evaluating programs for people with disabilities.
- Education and empowerment of family members through various campaigns for the timely identification of children with disabilities.
- Prioritization of the establishment of daycare centers for people with disabilities.
- The municipality of Klos, in cooperation with educational directorates, should take immediate measures to equip schools with ramps or other logistics for children with disabilities, where they are absent.
- For the Ministry of Health and Social Protection: The form used by doctors to diagnose the disability of people with disabilities should be expanded, since there is an increase in diagnoses, especially genetic ones for which there is no specific code, especially in cases of children.
- Detailing a map of health services offered to people with disabilities in ambulances or health centers.
- All public schools that have children with disabilities must have sensory classrooms and appropriate teaching aids.
- Klos Municipality, in cooperation with Vocational Training Centers, should set up programs for people with disabilities over 18 years of age to offer them vocational training courses, especially for those disabilities that do not prevent them from engaging in work with limited hours.
- The Municipality of Klos, in cooperation with public transport companies, should take measures to ensure that vehicles meet the logistical conditions for disabled people.
- Systematization of infrastructure for all people with disabilities (movement, vision, or hearing) in all public institutions of the municipality of Klos.
- Increasing the capacities of personal assistants to effectively address the challenges of healthcare for people with disabilities.
- Ensuring that health institutions are equipped with accessible facilities for people with disabilities for their visits.
- Increasing the capacities of municipal staff (including social administrators in administrative units and Needs Assessment Units set up in this municipality) for the design, implementation, and monitoring of one-year development programs for individuals with disabilities.
- Increasing the capacities of the Municipality's structures in areas that include the administration and monitoring of the Economic Aid scheme and disability.
- Providing training and information for the responsible local government staff to increase their professional capacities in the service of people with disabilities.
- Continuous training of social and health workers on how to treat people with disabilities.
- Psycho-social support for people with disabilities and their families.
- The municipality of Klos must offer daily services to all people with disabilities who are in difficult physical and mental conditions.



- Setting up an emergency shelter for cases when the families of disabled people are unable to take care of them.
- Creation of appropriate working conditions for the social administrator for the implementation of legal requirements regarding the follow-up and monitoring of the quality of life of people with disabilities through home verification.
- Increasing the capacities of municipal staff (social administrators in the neighborhood and administrative units) for the design, implementation, and monitoring of development programs for people with limited abilities.
- The Ministry of Education and Sports should increase the number of assistant teachers for children with disabilities and should have special training/specialization programs in providing teaching for these children.

Recommendations regarding discrimination (LNOB – risk factor)

- Implementation of anti-discrimination policies and awareness campaigns to fight stigma and promote the inclusion of people with disabilities in social and cultural life.
- Organization of social activities for people with disabilities to facilitate their socialization and integration into society.
- Increased focus on the inclusion of people with disabilities from rural areas in social and community life near the municipality of Klos.

Recommendations regarding vulnerability (LNOB – risk factor)

- Effective disaster or pandemic preparedness plans for families of people with disabilities and support mechanisms to address the unique needs of this group and their families.
- Support for families of people with disabilities through housing schemes.

7.1 Plan for communicating the conclusions and recommendations of the Social Mapping

The Gender Alliance for Development Center in cooperation with the Association for Local Autonomy has been in continuous communication with the municipality of Klos throughout the entire Social Mapping process. Following the Social Mapping Report, several meetings are planned with representatives not only of the Klos municipality as an institution but also with other interested stakeholders to present the recommendations of this study and advocate for the inclusion of some of them in the budgets of the Klos municipality. This will be achieved by making a presentation at one of the meetings of the Municipal Council near this municipality.

The cooperation established with the municipality of Klos for the development of this project has been very good and positive, so we do not anticipate any obstacles in the inclusion of some recommendations in the social plan for the revision of the budget for their financial coverage during the planning of the 2025 budget. However, interventions such as the construction of ramps and road logistics for easy and safe



access for people with disabilities do not necessarily have to wait for the 2025 budget to be realized.



8 Recommendations in line with the SDGs (Sustainable Development Goals)

Problem identification	SDG	Effect (Medium; Low; High)	Target	Indicator	Key institutions
People with disabilities not only cope with their disabilities throughout their lives but also encounter additional health problems due to the absence of certain medical specialties.	SGD 3: Good Health and Well-Being				
	Recommendation 1: Providing specialized medical services near residential centers.	High	Target 3.8: By 2030 achieve universal health coverage including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.	Number of services added according to findings. The number of people with disabilities who have benefited from specialized medical services near residential centers or within the municipality of Klos.	Ministry of Health and Social Protection; Municipality of Klos; Ministry of Finance and Economy.
	Recommendation 2: Cost recovery in cases when these services must be obtained	High		The number of people with disabilities who benefit from services.	



	outside the municipality of Klos.				
	Recommendation 3: Establishment of public Day Centers for people with disabilities as well as establishment of a residential center for people of this target group who suffer from extreme poverty.	High		Number of additional services added; Number of trained staff members; The number of people with disabilities who benefit from non-public daycare centers.	
Children with disabilities encounter challenges in attending schools or kindergartens due to inadequate logistics, particularly in rural areas. Moreover, the shortage of assistant teachers hampers their academic advancement,	SDG 4: Ensure inclusive and quality education for all				
	Recommendation 1: Equipping with proper logistics for access to school for children with different disabilities, especially those with movement disability, hearing and visual impairment.	High	Target 4.1: By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and	The number of support and specialized teachers for children with disabilities. The number of schools that meet the logistic criteria	Ministry of Education and Sports; Ministry of Finance; Regional Education Directorate;



<p>frequently resulting in interruptions to their educational journey.</p>			<p>effective learning outcomes</p>	<p>for children with disabilities.</p>	<p>Municipality of Klos.</p>
	<p>Recommendation 2: Review of the supported curriculum for this target group and raising the number of specialised supporting teachers for each child with disabilities.</p>	<p>High</p>	<p>Target 4.a: Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all.</p>		
<p>Families with members who have disabilities experience significant financial strain. Often, one</p>	<p>SDG 10: Reduced Inequalities</p>				



<p>family member is compelled to remain unemployed due to the unavailability of adequate services for their relative. The financial assistance provided by the state to these individuals is insufficient to meet basic needs. Additionally, even when they receive state financial support, the years spent caring for their relatives are not recognized as years of employment, resulting in a lack of access to essential social</p>	<p>Recommendation 1: Providing financial assistance to every guardian of people with disabilities who stay at home to care for them.</p>	High	<p>Target 10.1: By 2030, progressively achieve and sustain income growth of the bottom 40 per cent of the population at a rate higher than the national average.</p> <p>Target 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.</p>	<p>The number of families in the target group eligible to receive financial assistance from the state for the care of people with disabilities.</p> <p>Legislative changes concerning the monthly fee received by this target group due to disability.</p> <p>Revision of the law to acknowledge years of service for caregivers of individuals across all categories of disability.</p>	<p>Medical Commission for Assignment of Ability;</p> <p>Ministry of Health and Social Services;</p> <p>Ministry of Finance;</p> <p>Albanian Government.</p>
	<p>Recommendation 2: Review the amount of financial assistance for this target group.</p>	High			



security benefits and pension	Recommendation 3: Revise the law to recognize years of service for caregivers of individuals across all categories of disability.	High			
Poor transport infrastructure presents a significant challenge for people with disabilities. Families living in rural areas, in particular, encounter difficulties in accessing essential services due to the lack of nearby facilities, necessitating frequent trips. However, both public and private transportation options fail to meet the specific needs of these	SDG 11: Sustainable Cities and Communities.				
	Recommendation 1: The municipality mandates all transport operators to ensure that their services meet the required standards for accommodating people with disabilities.	High	Target 11.2: By 2030, provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, people with disabilities	Numri i operatorëve të linjës së transportit public ose privat që plotësojnë kushtet e nevojshme për personat me aftësi të kufizuara.	Municipality of Klos; Public Transport operators.
	Recommendation 2: The forecast in the annual budget of the municipality of Klos for the increase of the fund to cover the transport for this target group.	High		Rritja e linjës buxhetore për transportin e organizuar. Numri i personave që përfitojnë nga transporti i organizuar nga bashkia.	



individuals, exacerbating the situation.			and older people.		
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