

HELSINKI COMMITTEE FOR HUMAN RIGHTS

ХЕЛСИНШКИ КОМИТЕТ ЗА ЧОВЕКОВИ ПРАВА НА РЕПУБЛИКА МАКЕДОНИЈА  
KOMITETI I MAKEDONYA CUMHURİYETI'NİN HELSINKI TI-NDREPTULI-A E MANUŞENGERE KOMITETI BASO KOMITET ZA LJUDSKA PRAVA REPUBLIKE  
HELSINKI HELSINKI HELSINKO HELSINKI  
PER TE DREJTAT E HEBRIJOT I REPUBLIKES SE MAKEDONISE E INSAN HAKLARI KOMITESI OMLUIDI REPUBLICA NEJAMIJA KI PRABA REPUBLIKE MAKEDONJA MAKEDONIJE  
Naum Naumovski Borche 83; 1000 Skopje, P. Macedonia; tel/fax: + 389 2 311 9073; +389 2 329 0469  
Naum Naumovski Borche 83; 1000 Skopje, R. Macedonia; tel/fax: + 389 2 311 9073; +389 2 329 0469

UNIVERSAL PERIODIC REVIEW (UPR) STAKEHOLDER  
SUBMISSIONS

HELSINKI COMMITTEE FOR HUMAN RIGHTS  
OF REPUBLIC OF MACEDONIA (MHC)

Submission to the United Nations  
Universal Periodic Review

Thirty-second Session of the Working Group on the UPR  
Human Rights Council  
Third Cycle

January 2019

The Helsinki Committee for Human Rights of Republic of Macedonia (MHC) was formed in 1994 as a non-governmental organization working for the promotion and protection of human rights, without any political and religious orientation. MHC's objective is to raise awareness about the concept of human rights and freedoms based on international human rights documents. MHC monitors the situation with human rights, provides legal aid to citizens in cases of violation or limitation of their rights and freedoms and cooperates with other organizations and state bodies for the purpose of increasing the promotion, respect and protection of human rights and freedoms.



ul. Naum Naumovski Borche 83  
1000 Skopje  
Republic of Macedonia  
Tel: +389 2 3119 073  
Web: [www.mhc.org.mk](http://www.mhc.org.mk)  
E-mail: [helkom@mhc.org.mk](mailto:helkom@mhc.org.mk)



# HELSINKI COMMITTEE FOR HUMAN RIGHTS



4. Although most Roma people have health insurance and access to healthcare, it is often limited due to poverty. Cases of discrimination against Roma people in the area of healthcare are still frequent. The access to professional prenatal care poses a problem to a large number of Roma women, due to the insufficient number of gynecologists, as has been observed in Bitola, Prilep and Shuto Orizari. Not all municipalities have health mediators.
5. The biggest challenge in exercising the rights of social protection and all rights in general, is the problem with personal identification documents of Roma people. According to information by the MLSP, about 700 Roma are affected by this problem and cannot register in the birth registry. This places them in the highest social risk because until they are registered, they are unable to exercise any of the rights provided by the state.

## Recommendations:

- \*Expand the access to preschool education by putting into use additional preschool facilities in Roma residential areas.
- \*Promote the inclusion of Roma in primary education and decrease the number of Roma pupils in special education.
- \*Introduce Law on Social Housing.
- \*“De-ghettoize” Roma residential areas, invest in building residential buildings and access to social apartments for Roma people.
- \*Conduct regular numeration of houses and giving the streets names in Roma residential areas.
- \*Establish a Committee for Monitoring the Health of the Roma people
- \*Enhance the access and quality of prenatal and antenatal healthcare in Roma residential areas.
- \*Encourage pro-activity of healthcare workers, especially family doctors and patronage nurses in their communication with the Roma population for the purpose of health education.

## People with physical, intellectual and combined disabilities

6. The Constitution of Republic of Macedonia classifies persons with disability (called “invalid persons”) as a special group of citizens who require “special protection” and “conditions for their involvement in society”. The Law on Social Protection does not mention persons with disabilities in the general, anti-discriminatory clause (Article 20,

paragraph 1)<sup>3</sup>. The right to financial assistance from social protection intended for persons with disabilities is conditioned by the following: the extent of the damage and the medical diagnoses, the annual income, the reason for the occurrence of disability, and the age of the potential beneficiary. Biological and foster families do not have equal rights to financial assistance. The caregivers, apart from compensation for (child) care for persons with disabilities, have the right to financial assistance in the amount of 130€ and the right to a pension, as opposed to biological families, who cannot receive the same kind of support from the state. Of the total number of children placed in foster care families, in 2015, only 26 or 4.75% are children with physical disabilities. The total number of welfare recipients on any ground is decreasing each year: for a period of 10 years, from 64,000 in 2006, the number of welfare recipients drops to 24,982 in 2016. Social work centers are often located in buildings without access ramps and elevators, which makes it difficult for persons with disabilities to have access to services. Such are, among others, the social work centers in Gevgelija, Kochani, Radovish, Kriva Palanka, Shtip, Berovo, and Skopje. The renewal of the documentation for exercising a particular right is a major problem for persons with disabilities. They find it difficult to handle the procedure and often lose certain benefits.

7. Research among people with physical disabilities shows that 67.24% of the respondents, indicated the unavailability of health services, and mostly due to the physical inaccessibility of the healthcare institutions<sup>4</sup>. Maternity nurses are not sufficiently educated for the treatment and rehabilitation of children with disabilities at home. Health services are the least accessible to the deaf due to the lack of trained staff to work with deaf persons. Only the names of the medications, and not the instructions for use and indications, are written with Braille labels on the outer packaging. Exemption in the use of health services is only for persons with disabilities up to the age of 26. When using a hospital health care for a child/person with a disability above the age of three, the companion is not exempt from copayments during hospitalization. Medical rehabilitation is completely unavailable for people with physical disabilities. Good wheelchairs cost from 1,000 to 2,000 €, and hardly anyone can afford to buy them. There is no qualified staff in the country who will teach the people in the wheelchair how to use it, i.e. how to sit and move.
8. The representation of students with special educational needs in the regular primary schools in Macedonia in the last three school years shows an upward trend: from 471

<sup>3</sup>Law on Social Protection <http://www.mtsp.gov.mk/content/pdf/zakoni/ZSZ%20konsolidiran%20%20IX-2015.pdf>

<sup>4</sup>Analysis of the situation of people with physical disabilities

[http://www.mhc.org.mk/system/uploads/redactor\\_assets/documents/2581/\\_pdf](http://www.mhc.org.mk/system/uploads/redactor_assets/documents/2581/_pdf)



# HELSINKI COMMITTEE FOR HUMAN RIGHTS



- \*Improvement of the Law on Health Insurance and the Law on Health Protection in order to allow persons with disabilities to use free primary, secondary and tertiary health protection in accordance with the need arising from the disability and regardless of the reason for the occurrence of the disability.**
- \*Securing an unobstructed access and availability of all health facilities.**
- \*Ensuring the involvement of persons with disabilities in the regulatory bodies for issuing a work permit for healthcare institutions.**
- \*Introducing an obligation to make the medication instructions for use in Braille Writing.**
- \*Amendments to the Rulebook on the content and manner of exercising the rights and obligations from the compulsory health insurance, which will allow for the right of companion to be extended to all persons with physical disabilities, without establishing age or other medical restrictions.**
- \*Adopting a new Rulebook on the indications for exercising the right to orthopedic and other devices and its synchronization with the CRPD, which will define the quality, accessibility and the right to a choice for persons with physical disabilities in terms of orthopedic and other devices necessary for an independent life.**
- \*Providing sufficient budgetary resources to support the inclusion of students with disabilities in regular education.**
- \*Ensuring full physical accessibility to school facilities in accordance with international standards, including internal premises and equipment with didactic and other necessary means, as well as materials for inclusive teaching.**
- \*Textbooks and other educational materials should be provided in Braille system, in audio format and/or in accordance with web-accessibility standards. Law and bylaws should stipulate submission of all materials to the MES in electronic form in accordance with the international standards for web accessibility.**
- \*Systematically defining the role and responsibilities of the inclusive school teams and providing them with training and resources as to enable them in performing the intended role. Ensuring compulsory involvement of parents of children with disabilities (and children in primary and secondary education) in inclusive school teams.**
- \*Adoption of a new law on employment of persons with disabilities according to “quota system” and “empty chair” system.**
- \*Raising awareness among employers for the appropriate workplace adjustments as an opportunity which is already subsidized by the state.**
- \*Introduction of the principle of equitable representation of persons with disabilities in the public administration and mandatory keeping of records for the employed persons with disabilities in all demographic characteristics.**

# HELSINKI COMMITTEE FOR HUMAN RIGHTS



## Women from rural areas

10. Case studies and analysis within a conducted research<sup>5</sup> shows that, the life of rural women in various settings is different in comparison to the one in the past due to social changes resulting from the democratization of society, as well as women`s aspiration towards equality and globalization. However, in order to achieve full gender equality for the rural woman in society, they need greater economic autonomy and independence, as well as greater representation in the political life. The patriarchal matrix and traditional division of male and female gender roles, particularly in the home and family, still pose great obstacles, especially to women in rural areas. They have very little opportunities for social life, since most often, coffee shops or cafes are “forbidden places” for women, and other entertainment facilities do not even exist. The distance from the larger cities and the lack of public transport pose additional obstacles to their socialization in public spaces, and as a result, the only option they have are the interactions in their homes. These women consider that the state should make additional efforts to build kindergartens, schools, and clinics that will make their lives easier. The adoption of financial assistance policies can stimulate the development of rural regions.

## Recommendations:

- \*Introduce changes to the curriculum in primary schools in order to implement courses and textbooks that will break gender stereotypes.**
- \*Implement comprehensive sex education.**
- \*Open institutions for preschool children in rural municipalities.**
- \*Re-purpose and equip unused institutional facilities in rural places for medical practices.**
- \*Implement balanced territorial distribution of gynecological practices and measures to encourage gynecologists to work in rural areas.**
- \*Place oral contraceptives for women and men on the positive list.**
- \*Employ mobile gynecological clinics that will visit the outermost rural areas and will provide consultations, examinations and services to as many rural women as possible. -**
- \*Introduce a system for keeping records of extramarital unions, particularly of those in which one or both partners are underage**
- \*Establish a functional system for coordination of MoI and CSW regarding reporting and treatment of cases of domestic violence in rural area, including consolidated statistics;**

<sup>5</sup>Analysis of the situation of women in rural areas

[http://www.mhc.org.mk/system/uploads/redactor\\_assets/documents/3056/Ruralni\\_Sredini\\_\\_\\_\\_.pdf](http://www.mhc.org.mk/system/uploads/redactor_assets/documents/3056/Ruralni_Sredini____.pdf)

# HELSINKI COMMITTEE FOR HUMAN RIGHTS



## Refugees/migrants

11. During 2015, 2016 and 2017, Macedonia was affected by the world refugee crises as a transit country on the “Balkan route” through which thousands of refugees crossed to get to EU countries. During this period, a number of human rights violations of migrants and refugees were noted by national and international human rights organizations. Starting from October, 2015 until March, 2018, MHC provided free legal aid and monitored the situation in both transit camps in Gevgelija and Kumanovo by every day presence of field monitors. Some of the noted violations during this period include: around 28 refugees/migrants lost their lives on the territory of Macedonia, including, 14 migrants who were killed in a train accident in April, 2015. The case was declared an accident, no autopsy was performed on the bodies and they were not identified. No responsibility was claimed. Refugees were unlawfully detained in reception centers for several months as witnesses in criminal cases against smugglers and in transit camps for more than one year without any judicial decision or legitimate reason. On multiple occasions was noted the abuse of police powers, the excessive use of force and torture against refugees and migrants on the Greek-Macedonian border. During the transit of refugees by trains, a discriminatory police was introduced and migrants were charged twice as much for a train ticket than Macedonian citizens. During this period of time and until this day, authorities perform unlawful deportation of refugees/migrants from Macedonia to Greece (push-backs) in the absence of any lawful procedure or registration, simply “pushing” refugees across the border line towards Greece in an open field. This practice continues up to date, with 100-200 refugees/migrants being sent back to Greece on a monthly basis.

## Recommendations:

- \*Urgently stop the practice of illegal, group “deportation” of refugees and migrants to neighboring countries, without any official procedure or established cooperation with the cross border security forces. All action of returning (readmission) must be in accordance with the human rights standards and must be conducted through cooperation among the countries.**
- \*Establish a system of registration of all refugees and migrants transiting the country in order to increase the protection of their human rights.**
- \*The right to seek asylum must be guaranteed to all refugees or migrants, without delay or conditioning.**
- \*Police powers must be exercised in accordance with the law and inhuman or degrading treatment or torture must not be tolerated.**



HELSINKI COMMITTEE FOR HUMAN RIGHTS

 ХЕЛСИНШКИ  КОМИТЕТИ И МАКЕДОНИЈА  КОМИТЕТ ДИ  ХЕЛСИНСКО  ХЕЛСИНШКИ   
 HELSINKI  CUMHURİYETİ'NİN  HELSINKI  KOMİTEĞİ BAŞO  КОМИТЕТ ЗА ЉУДСКА  
PER TE DREPTAT E HBERIOTI  HELSINKI  TI- NDREPTULI-A E MANUŞENGERE  ПРАВА РЕПУБЛИКЕ  
I REPUBLIKES SE  İNSAN HAKLARI KOMİTESİ  OMLUIDİREPUBLICA NEJAMIJA KI  ПРАВА РЕПУБЛИКЕ  
MAKEDONISEE  M A S C H E D O N I A  REPUBLKA MAKEDONJA  МАКЕДОНИЈЕ

Наум Наумовски Борче 83; 1000 Скопје, Р. Македонија; тел/факс: + 389 2 311 9073; +389 2 329 0469  
Naum Naumovski Borche 83; 1000 Skopje; R. Macedonia; tel/fax: + 389 2 311 9073; +389 2 329 0469

**\*Refugees and migrants transiting the country must not be restricted their freedom of movement and must not be unlawfully held in custody as witnesses in criminal procedures against smugglers.**