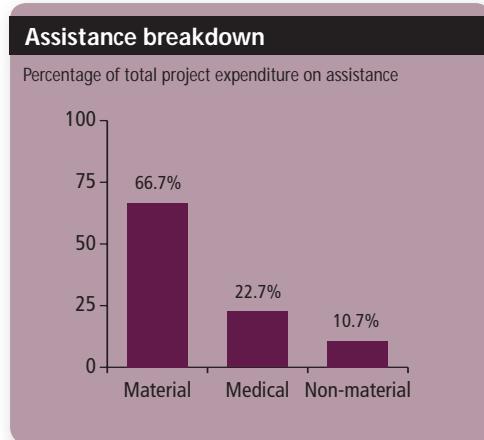




# The former Yugoslav Republic of Macedonia

**H**SP operated in the former Yugoslav Republic of Macedonia from October 2003 through August 2005. IOM administered comprehensive assistance to 2,585 elderly Roma in the areas surrounding Skopje, Prilep and Bitola, where many survivors reside. Three projects were carried out in partnership with NGOs experienced in humanitarian assistance to Roma communities.

Country snapshot	
Total beneficiaries	2,585
Men	46%
Women	54%
Service providers	2
Projects implemented*	3
Implementation period	Oct 2003-Aug 2005
Average project length*	15 months
*Initial project and extensions count as one.	



*More than 900 beneficiaries received new national ID cards, birth certificates and Macedonian citizenship. Project lawyers worked to help Roma beneficiaries register for state healthcare and other entitlements.*

## Outreach

IOM sought project partners in Macedonia able to identify and assist Roma Holocaust survivors. Staff met with authorities in municipalities with high Roma concentrations. The Roma NGOs contacted were found to have neither the experience nor the necessary capacity to execute large-scale humanitarian projects.

IOM eventually considered three potential service providers. The first and most ambitious proposal was rejected due to high overheads. The Center for Civic Initiative (CCI), with its Roma partner Romani Shukaripa, sought to assist victims in Prilep and Bitola in central Macedonia. IOM used its own staff to help Roma living in and around Skopje. Under previous projects, IOM Skopje had established contacts with Roma NGOs and communities in and around the capital. IOM's logistical expertise and tax-exempt status were key to keeping costs low.

## Beneficiaries

IOM Skopje estimated that some 4,500 Roma survivors lived in Macedonia in extreme poverty. HSP reached victims living in segregated

settlements as well as in integrated areas. Nearly half of Macedonia's Roma live in the Skopje area. The neighbouring municipality of Suto Orizari is probably the largest Roma settlement in Europe and home to some 2,000 survivors.

Many elderly Roma are illiterate and only a small percentage receive state pensions. They are often without adequate food and housing, unaware of entitlements and suffering from undiagnosed health problems. A great number of survivors live with extended families in cramped quarters and unheated attics, or in shacks built of flimsy materials. Support helped them to survive the winter, receive life-saving medications and connect socially with other Roma survivors. Beneficiaries expressed deep gratitude for the assistance received.

The most vulnerable elderly Roma in Macedonia live in the eastern part of the country. Some of these had fled several years before from the war in Kosovo and were living in some of the most desperate physical conditions seen in the course of HSP.

### Beneficiary account

**F**akine and Besim lived in the hilltop Roma neighbourhood of Bair, in Macedonia, where residents fear "skinheads" who roam the lower part of the town, and long for the old Yugoslavia.

Survivors' grandchildren drop out of school because of persistent anti-Roma prejudice, the lack of adequate school supplies and of clean clothes to wear, and to help their families by begging, hauling or black market trade.

IOM's project in Bair allowed needy victims to spend less time gathering firewood and to see a doctor in their own part of town.

25 miles to the northeast of Bair was Trizla 2, a Roma neighbourhood in the middle of a modern Macedonian



town, yet cut off from sanitation, its streets alternately clogged with mud or snow.

Here, Roma lived 15 to a room, their homes tapping into the industrial water supply.

Though IOM could not solve these problems, it did make life more comfortable for a few.

## Partner organization

The good ladies of “Esma”, a Roma women’s organization in Skopje founded some 13 years ago and IOM’s project partner in the delivery of food, winter and medical assistance.



## Projects

The **Center for Civic Initiative (CCI)** served 505 beneficiaries in Prilep and Bitola, where more than 10,000 Roma live in the ghetto-like enclaves of Trizla 2 and Bair. Conditions are grim, with sewage running in the streets between houses of cardboard or scrap metal.

Comprehensive assistance was designed to meet beneficiary needs. CCI delivered food and hygienic packages to their homes and HSP coal helped whole families to keep warm throughout the winter.

Two social clubs were established and equipped with TVs, stereo systems, games like domino and chess, newspapers and magazines. Part-time staff included physicians, nurses, lawyers, social workers and hosts. Beneficiaries appreciated the opportunity to spend time with their peers and away from the cramped quarters they shared with extended families.

CCI hired younger Roma to provide homecare to the most vulnerable. They helped with cooking, cleaning, personal hygiene and shopping. HSP provided emergency financial support to the 150 neediest victims, often used to pay overdue utility bills and for minor home repairs.

A project extension included 80 newly identified survivors and continued assistance to those already served. This included firewood and flour for baking. Wood delivery was especially arduous and time-consuming due to the narrow, unpaved settlement roads.

Under its initial HSP project, **IOM Skopje** assisted 2,000 Roma survivors living in the nearby districts of Suto Orizari, Topaana, Gjorce Petrov and Baltinci. IOM was assisted in beneficiary identification and needs assessments by the Roma Women’s Association “Esma”. This NGO also helped with assistance delivery and to ensure cooperation between beneficiaries and IOM staff.

IOM had to explain to many poor Roma neighbours that HSP was intended for Holocaust survivors only. Eligible beneficiaries found it hard to distinguish HSP from cash compensation paid to individual claimants. IOM explained that HSP assistance did not disqualify beneficiaries from other programmes.

*Many vulnerable elderly Roma in Macedonia live in the eastern part of the country. Some had fled several years before from the war in Kosovo and were living in the most desperate physical conditions seen in the course of HSP.*

<b>Assistance breakdown and beneficiaries assisted</b>		
<b>Type of assistance</b>	<b>% of beneficiaries receiving assistance</b>	<b>% of total project expenditure on assistance</b>
<b>Material</b>		
Food (except food packages)	22.6	0.8
Food packages	96.9	18.6
Clothing	77.4	9.4
Winter assistance	100.0	25.8
Emergency financial support	17.4	3.9
Hygienic supplies	96.9	8.1
<b>Medical</b>		
Medical and/or dental assistance	89.2	22.7
<b>Non-material</b>		
Homecare	19.5	0.4
Legal assistance	54.4	3.6
Social assistance	96.9	6.6

Comprehensive HSP assistance included regular distributions of food and hygienic supplies, firewood and clothing. Emergency financial support was given to the 300 most vulnerable survivors. IOM established and operated five social centres, venues for survivors to meet and participate in numerous social activities. Those visiting the centres had regular access to medical care and legal counselling.

Legal assistance facilitated beneficiaries' transactions with local and state institutions. More than 900 beneficiaries received new national ID cards, birth certificates and Macedonian citizenship. Physicians gave medical check-ups, specialist referrals and free medications. Project



lawyers worked together with them to help Roma beneficiaries register for state healthcare as well as other entitlements.

Based on its first HSP experiences, IOM Skopje devised a new project for 1,500 Roma survivors in Suto Orizari and Topaana. All project beneficiaries received medical assistance. Project staff facilitated access to state healthcare and medical facilities. Hospital treatment, surgery, dental care, eyeglasses, orthopaedic shoes and hearing aids were also granted where needed. Project physicians visited bedridden or less mobile victims at home.

Survivors who had fled from Kosovo considered medical and legal assistance to be especially meaningful. Some without Macedonian citizenship or valid personal documents had no right to state benefits. IOM aided approximately 40 elderly Kosovo Roma with free medical check-ups, treatment and medications.

Working with the Institute for Social Medicine at Skopje's Cyril and Methodius University, IOM helped develop health and legal services information materials for Roma communities. The project trained NGO members, community workers and local institutions working with Roma to utilize these materials.

## Conclusion

IOM established seven assistance centres in Macedonia and gave over 2,500 Roma survivors comprehensive humanitarian and social assistance. Medical, social and legal assistance helped to bring about long-lasting, meaningful changes in beneficiaries' lives. Material assistance was also greatly needed. IOM paid basic hospitalization costs for the destitute, and also bought stoves and winter fuel to improve the lives of survivors and their equally needy families.

HSP allowed IOM Skopje to continue to work closely with Roma and pro-Roma NGOs, thereby building partnerships with other national and local institutions working with this group. Following the phase-out of HSP activities, IOM has continued to develop projects to meet the needs of broader Roma communities in Macedonia.



## Project overview

HSP project*	Beneficiaries	Assistance types	Start	End
Center for Civic Initiative	505	Food packages, winter assistance, homecare, emergency financial support, medical and dental assistance, social assistance, legal assistance, hygienic supplies	Oct 03	Oct 04
Center for Civic Initiative (1 <sup>st</sup> revision)	585	Food (except for food packages), winter assistance	Oct 04	Jan 05
IOM Skopje (1)	2,000	Food packages, clothing, winter assistance, emergency financial support, medical and dental assistance, social assistance, legal assistance, hygienic supplies	Apr 04	Jan 05
IOM Skopje (2)	1,500	Medical and dental assistance, legal assistance	Feb 05	Aug 05
<b>Roma and Sinti, total**</b>	<b>2,585</b>			

\* Initial projects and project extensions are listed separately.

\*\* Beneficiaries assisted under more than one project or extension are counted only once.

Notes on project names: "Revision" denotes extension of an existing project. Number (only) in parentheses indicates a service provider with more than one project approved for funding.

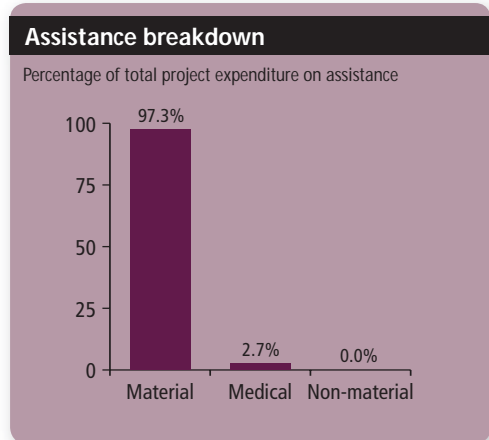




## Republic of Moldova

**F**rom May 2003 to August 2005 IOM Chisinau managed two HSP projects, thereby assisting 2,342 elderly Roma residing throughout the Republic of Moldova.

Country snapshot	
Total beneficiaries	2,342
Men	36%
Women	64%
Service providers	1
Projects implemented*	2
Implementation period	May 2003-Aug 2005
Average project length*	23 months
*Initial project and extensions count as one.	



## Outreach

IOM directed its initial outreach efforts in Moldova at finding potential Roma service providers with access to Roma communities, and the capacity to administer HSP assistance. It held meetings with representatives from local and international NGOs, but none had any experience in large-scale humanitarian assistance. Scarce data on the number and locations of Roma in Moldova discouraged many organizations from submitting a proposal.

IOM chose the **Salvation Army (SA)** as a project partner due to its record in humanitarian assistance. The SA agreed to work with local Roma NGOs to gain community access and support in delivering assistance. Roma organizations that had gathered information for claims programmes estimated that up to 2,000 survivors could be helped under HSP in Moldova.

Nevertheless, as neither the Salvation Army nor its partner NGOs had detailed information on Roma survivors in Moldova, IOM first approved a needs assessment project. Utilizing a national network of staff and volunteers, the SA located 1,505 eligible Roma victims in Moldova and began planning to assist them.

## Beneficiaries

Unemployment and widespread poverty in Moldova have prompted unskilled and landless Roma to seek work abroad, often leaving older family members to care for children. Elderly Roma without formal work histories receive a state allowance of US\$ 4 per month. Many cannot afford to buy coal and have to gather firewood from the forest, often illegally.

Although some live isolated from majority populations, Roma in Moldova are generally assimilated and live near other groups. This facilitated the SA's access to Roma households.



*HSP eligibility criteria define a needy beneficiary as living on US\$ 4 per day or less. In Moldova, many elderly Roma without formal work histories receive a state allowance of as low as US\$ 4 per month.*



Distrust was HSP's main obstacle in reaching Roma beneficiaries; other organizations had also interviewed and collected data on survivors with the promised aid failing to materialize. Yet, initial assistance activities prompted many eligible survivors to come forward to be included in the project. Numbers rose quickly.

Winter assistance in Moldova consisted of coal, blankets, bedding and heating bill payments. Victims also received food and hygienic supplies, clothing, medical assistance and emergency financial support. Material assistance was a priority due to harsh living conditions. As well as meeting urgent needs, it freed scarce resources for other expenses like medications. Survivors told IOM how happy they were to share what they received with their families and so ease the strain of day-to-day survival for all.

## Projects

The lack of data about Roma in Moldova made it necessary for the Salvation Army to assess beneficiary needs and numbers before putting together a proposal. It relied on the support of Roma NGOs and leaders to gain access to beneficiary communities. In cases where Roma contacts were not available or uncooperative, SA staff conducted assessments themselves.

Some eligible Roma sought to register in more than one district. Some leaders disagreed about beneficiary identities and accused the Salvation Army of helping persons who were not “pure” Roma. Others were reluctant to work with a non-Roma organization.

The Salvation Army launched its second HSP project, now offering assistance, in the middle of winter. Aid consisted of coal, firewood and food packages.

Problems arose when the service provider learned that firewood could not be purchased domestically. Illegal cuttings had depleted Moldova’s firewood supply. The Salvation Army substituted firewood with more coal and food packages. Coal delivery became a monumental task. Increased work volume, bad weather and poor roads caused a three-month project to extend to seven.

The task of providing coal for the winter allowed the SA wide access to Roma communities, helping it to identify more survivors and learn about their needs.

The next HSP project extension by the Salvation Army in Moldova again offered winter fuel, food packages, hygienic supplies, medical assistance and emergency financial support. Medical assistance included over-the-counter medications.

The delivery of assistance continued to pose logistical problems. Although coal had been bought at lower summer prices, an international blockade on certain rail traffic increased transportation



*The main obstacle to reaching Roma beneficiaries was lack of trust. Other organizations had interviewed and collected data on survivors, then aid had failed to materialize.*

costs. In winter, Roma may take seasonal employment abroad with the remaining relatives gathering in a few houses to save on heating and utilities. Deliveries could not be made when these beneficiaries were not at home as neighbours might steal the aid. Distribution was also hard to coordinate as few had telephones. Throughout the project period the SA strove to establish contacts in each location to keep track of beneficiaries.

The fourth and last project extension implemented by the Salvation Army served 1,300 of the most needy survivors in 194 locations. Assistance again focused on immediate material needs. It included food and hygienic packages, clothing and winter assistance, this time consisting of blankets and beddings.

When delivering assistance to integrated communities, the service provider found it difficult to explain to ineligible community members, who were just as needy as their Roma neighbours that they were not eligible for assistance under HSP.

Perhaps the greatest challenge came late, when the service provider had to remind project beneficiaries that HSP assistance was temporary

<b>Assistance breakdown and beneficiaries assisted</b>		
<b>Type of assistance</b>	<b>% of beneficiaries receiving assistance</b>	<b>% of total project expenditure on assistance</b>
<b>Material</b>		
Food (except food packages)	0.0	0.0
Food packages	85.4	27.7
Clothing	55.5	5.0
Winter assistance	85.4	55.3
Emergency financial support	12.8	2.6
Hygienic supplies	85.4	6.7
<b>Medical</b>		
Medical and/or dental assistance	85.4	2.7
<b>Non-material</b>		
Homecare	0.0	0.0
Legal assistance	0.0	0.0
Social assistance	0.0	0.0

and would have to end soon. Although the Salvation Army had by then gained the trust of the Roma communities, beneficiaries who had become used to material support may again have felt abandoned and discouraged.

Throughout project implementation, the SA increased its capacity for large-scale humanitarian assistance. The capacity of local organizations and public authorities was also raised. One Roma leader indicated that assistance to Roma Holocaust survivors had raised their self-esteem and helped them overcome fears associated with self-identification.

## Conclusion

HSP recognition and assistance in Moldova reminded elderly survivors that their Holocaust-era suffering had not been forgotten. Material assistance provided many needy Roma with the means of survival. Such help was desperately needed by both the elderly and their families. Beneficiaries expressed their regret to IOM and its partners to see HSP end.

Although IOM failed to identify Roma and pro-Roma organizations with the capacity and experience to implement sizeable projects, several organizations contributed to the programme. In the process these gained valuable administrative and representation skills, as well as enhanced credibility in their own communities.

A secondary result of HSP was that the specific needs of Roma communities across Moldova were identified. Roma NGOs and representatives became increasingly aware of their own potential contribution to local initiatives.

Building on the experience gained through frequent meetings with survivors and its close cooperation with partner NGOs, IOM Chisinau became involved, along with two other IOM offices, in a Holocaust survivor interview project financed by the German Foundation.



## Project overview

HSP project*	Beneficiaries	Assistance types	Start	End
Salvation Army, needs assessment (1)	n/a	Needs assessment only	May 03	Aug 03
Salvation Army (2)	1,982	Winter assistance	Nov 03	May 04
Salvation Army (2) (1 <sup>st</sup> revision)	2,000	Food packages, winter assistance, emergency financial support, medical and dental assistance, hygienic supplies	May 04	Apr 05
Salvation Army (2) (2 <sup>nd</sup> revision)	1,300	Food packages, clothing, winter assistance, hygienic supplies	May 05	Aug 05
<b>Roma and Sinti, total**</b>	<b>2,342</b>			

\* Initial projects and project extensions are listed separately.

\*\* Beneficiaries assisted under more than one project or extension are counted only once.

Notes on project names: "Revision" denotes extension of an existing project. Number (only) in parentheses indicates a service provider with more than one project approved for funding.

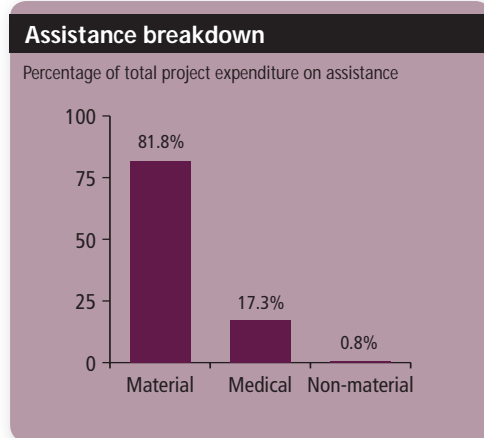




## Poland

**H**SP operated Roma assistance projects in Poland from January 2003 through November 2004. IOM Warsaw oversaw the implementation of 11 projects. Two had to be terminated early. Assistance was delivered to 1,825 Roma survivors.

Country snapshot	
Total beneficiaries	1,825
Men	42%
Women	58%
Service providers	9
Projects implemented*	11
Implementation period	Jan 2003-Nov 2004
Average project length*	10 months
*Initial project and extensions count as one.	



## Outreach

IOMWarsaw addressed its call for proposals to both Roma and non-Roma NGOs. An information meeting for interested Roma organizations was held in July 2002. Individual meetings were then held with interested non-Roma NGOs. IOM received 17 project proposals for HSP Roma assistance in Poland.



## Beneficiaries

The persecution of Roma in Poland during the Nazi period was especially harsh, leaving relatively few survivors. Roma now live throughout Poland, with no large concentrations in any one area.

IOM assessments revealed frequent scarcities of food, coal and medical care. Heating fuel was often a priority to warm homes in winter and spare victims the embarrassment of scavenging in dumps or abandoned buildings for something to burn to heat their homes with. Many Roma looked to IOM for medications they could not otherwise afford. In addition, potential beneficiaries needed social and legal assistance to access entitlements, including the right to oppose eviction orders, make home repairs and apply for veterans benefits.

As in other countries, IOM identified Roma community needs far beyond the means of HSP. Living conditions were extremely poor. Entire “illegal” settlements were found to lack drinking water, sanitation and adequate shelter. When asked about their needs, victims often stated those of their children and grandchildren first.

## Projects

The **Polish Red Cross** could provide individualized assistance to victims thanks to its decentralized management structure. Local offices hired Roma to ensure access to victim communities. The Red Cross sometimes encountered opposition from majority populations, town officials and the media when having to explain that only some were eligible for IOM assistance. Officials in Warsaw had to intervene with one local government to prevent HSP beneficiaries from losing state assistance on account of their inclusion in HSP.

*One service provider’s idea of delivering sides of pork was soon copied by several other projects and to the great satisfaction of beneficiaries.*

### Beneficiary account

**T**he textile mills of Lodz, southwest of Warsaw, once employed many unskilled Roma workers. Today, most of the citizens of Lodz are unemployed and barely getting by.

Roma families are large; their quarters cramped. A survivor’s monthly welfare payment of US\$ 100, may have to be shared with a family of 15. Begging, scavenging for fuel, and fortune-telling help to make ends meet.

Natalia, who supports several grown sons unable to find legal employment in the West, insisted on reading the IOM visitor’s hand, for free.

Several survivors in Lodz said they had been tinkers before; under Communism, their travelling *tabors* were made to settle down, and Polish Roma to take fixed



employment. IOM was told that “It was better in the woods”. For Roma living in abject urban squalor, this seemed a cry of despair.

*The persecution of Roma in Poland during the Nazi period was especially harsh, resulting in relatively few survivors.*

The **Association of Romani Women** in Krakow began with a relatively small project. At first, the NGO had difficulty gaining the trust of potential beneficiaries, but when the project started many more came forward. This led to a larger new project. According to its coordinator, HSP had made it possible for the beneficiaries not to have to choose between eating, paying rent or healthcare.

The **Union of Polish Gypsies (UPG)** also began with a small project and expanded, eventually serving nearly 600 survivors across a third of Poland. It was responsible for some of HSP's more visible and enthusiastically received assistance. Early in the Christmas season, it delivered a side of pork to each beneficiary, reviving a tradition few could now afford. The meat was home-processed with the help of neighbours and family. The UPG gave other material assistance in the form of food packages, hygienic supplies, clothing, winter and emergency financial support. These were complemented by more sustainable social, legal and medical aid.

Despite limited administrative capacity, the **Roma Union in Wloclawek** was able to help victims from a small Roma community in the towns of Wloclawek and Plock who would otherwise not have been assisted.

<b>Assistance breakdown and beneficiaries assisted</b>		
<b>Type of assistance</b>	<b>% of beneficiaries receiving assistance</b>	<b>% of total project expenditure on assistance</b>
<b>Material</b>		
Food (except food packages)	61.9	26.2
Food packages	45.3	7.1
Clothing	28.1	5.4
Winter assistance	78.1	34.0
Emergency financial support	35.2	2.5
Hygienic supplies	65.3	6.7
<b>Medical</b>		
Medical and/or dental assistance	60.2	17.3
<b>Non-material</b>		
Homecare	16.7	0.4
Legal assistance	30.1	0.4
Social assistance	0.0	0.0



*The project brought assistance to a small group of beneficiaries who otherwise could not have been helped due to internal conflicts in the Krakow Roma community.*

IOM terminated the project of the **Roma Association of Nowy Sacz** early after encountering problems with project implementation and accounting. The project had begun by identifying and assisting some of the poorest Roma in Poland, the “Bergitka” Roma. Some of these survivors were later included in the Polish Red Cross project.

The project of the **Center for Social Assistance Rabka-Zdroj** was a unique instance of outsourcing HSP activities to a municipal entity. The Center’s first-hand knowledge of beneficiaries was also useful in ensuring their inclusion in the project of the Polish Medical Mission. Nevertheless, IOM found that it was time-consuming for the service provider to follow both its own and IOM’s financial procedures, underlining the advantage of working with more autonomous counterparts.



The project of **Roma Ethnic Minority “Solidarity”** was also terminated before completion due to a lack of transparency in beneficiary assistance records. Eligible beneficiaries were later helped by the Polish Red Cross.

The **Polish Medical Mission (PMM)**, while skilled in international humanitarian aid, had little experience with Roma assistance. It worked through small Roma NGOs, an ideal combination of access and expertise. The project delivered healthcare services with a mobile medical unit and collected information on Roma community health in Poland.

The **Association of Romani People Krakow Nowa Huta** filled an important gap by helping a small number of survivors who

otherwise might not have received any other assistance because of internal conflicts in the Krakow Roma community.

**IOM Warsaw** implemented HSP directly for both disabled (see separate chapter) and certain Roma survivors in Poland. This project allowed IOM to reach 87 Roma victims in locations where no partner had offered to assist.

## Conclusion

HSP reached Roma survivors throughout Poland with assistance designed to meet individual needs. Material aid, especially winter fuel and food packages, was, wherever possible, supplemented with medical care and counselling.

IOM's staggered instalment schedule for service provider payments (under all agreements) and careful and continual monitoring of project implementation and financial compliance were crucial. Not only did such measures facilitate the professional growth of partner organizations, but they also ensured, as far as possible, that project funds were used for direct assistance to victims and not misappropriated or wasted by incompetent or dishonest service providers. Project termination not only conserved the donors' finite resources, but also enabled "saved" or unpaid project funds to be redistributed for the benefit of survivors under other HSP projects.

IOM's project development and monitoring efforts contributed to the professional growth of Roma organizations, including some with no previous experience in humanitarian assistance. Several partners have since begun working with other donors and programmes.

IOM Warsaw continued to assist Roma through a European Social Fund project designed to create jobs for Roma in cooperatives. HSP's former partners, notably the Polish Red Cross, the Association of Romani Women in Poland and the Union of Polish Gypsies continued working with IOM to assist Roma in Poland.



## Project overview

HSP project*	Beneficiaries	Assistance types	Start	End
Polish Red Cross	350	Food (except for food packages), food packages, emergency financial support, hygienic supplies	Jun 03	Apr 04
Polish Red Cross (1 <sup>st</sup> revision)	501	Food (except for food packages), winter assistance, emergency financial support, medical and dental assistance	Apr 04	Sep 04
Association of Romani Women (1)	38	Food packages, winter assistance, emergency financial support, medical and dental assistance	Jan 03	May 03
Union of Polish Gypsies	400	Food (except for food packages), food packages, winter assistance, emergency financial support, hygienic supplies	Jan 03	Jun 03
Union of Polish Gypsies (1 <sup>st</sup> revision)	596	Food (except for food packages), food packages, clothing, winter assistance, homecare, emergency financial support, legal assistance, hygienic supplies	Jun 03	Oct 04
Roma Union in Wloclawek	24	Food packages, winter assistance, homecare, medical and dental assistance	Jan 03	Jun 03
Roma Association of Nowy Sacz	213	Food (except for food packages), food packages, winter assistance, homecare, emergency financial support, hygienic supplies	Sep 03	Sep 04
Center for Social Assistance Rabka-Zdroj	8	Winter assistance	Jan 03	Mar 03
Roma Ethnic Minority "Solidarity"	47	Winter assistance	Mar 03	Apr 03
Polish Medical Mission	216	Medical and dental assistance	May 03	Nov 04
Association of Romani People Krakow Nowa Huta	12	Food (except for food packages), clothing, homecare, medical and dental Assistance	Mar 04	Nov 04
Association of Romani Women (2)	59	Food (except for food packages), winter assistance, emergency financial support, medical and dental assistance	Sep 03	May 04
Association of Romani Women (2) (1 <sup>st</sup> revision)	83	Food (except for food packages), winter assistance, emergency financial support, medical and dental assistance, hygienic supplies	Jun 04	Oct 04
IOM Warsaw	87	Food (except for food packages), food packages, clothing, winter assistance, emergency financial support, medical and dental assistance, hygienic supplies	Aug 04	Oct 04
<b>Roma and Sinti, total**</b>	<b>1,825</b>			

\* Initial projects and project extensions are listed separately.

\*\* Beneficiaries assisted under more than one project or extension are counted only once.

Notes on project names: "Revision" denotes extension of an existing project. Number (only) in parentheses indicates a service provider with more than one project approved for funding.

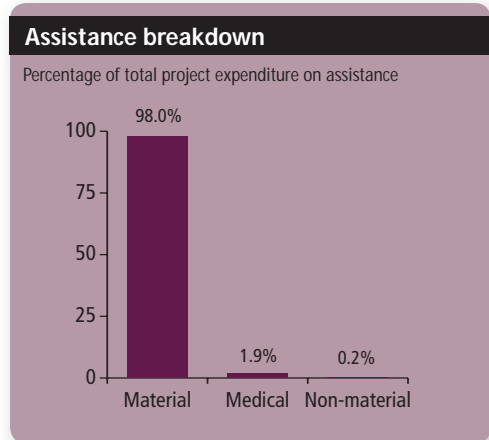




# Romania

**I**OM Bucharest administered four HSP projects from September 2002 to January 2006. A total of 10,245 Roma survivors of the Holocaust were identified and assisted in Romania.

Country snapshot	
Total beneficiaries	10,245
Men	41%
Women	59%
Service providers	4
Projects implemented*	4
Implementation period	Sep 2002-Jan 2006
Average project length*	20 months
*Initial project and extensions count as one.	



## Outreach

IOM Bucharest met with staff from the Roma Office of the Romanian Department for Interethnic Relations in order to publicize HSP and to raise programme awareness. IOM participated in training activities for community mediators at the Resource Center for Roma Communities. IOM also contacted and met with local government representatives, Roma political parties and community leaders.

IOM sent requests for proposals to 23 Roma and non-Roma organizations. It shared HSP project forms with those that expressed interest in the programme. In the course of HSP, IOM Bucharest received seven completed proposals. Three of these were rejected as they included activities that fell outside programme parameters or, despite help from IOM, were poorly prepared.

## Beneficiaries

Pre-implementation research helped locate major concentrations of Roma Holocaust survivors in Romania, as well as obtain a rough estimate of overall numbers. Additional research was carried out by service providers and IOM throughout programme implementation.

IOM Bucharest now estimates there to be at least 30,000 eligible Roma survivors in Romania.

IOM made over 160 monitoring trips to projects in the field. HSP staff visited more than 220 localities and interviewed 5,500 beneficiaries, gaining extensive knowledge of both.

The majority of Roma assisted in Romania lived in rural communities, many of them remote and isolated from other villages or settlements. Access roads, if they existed at all, were often in poor condition. In winter many of the communities were cut off entirely.

Most beneficiaries lived in extremely poor conditions. Houses were made of mud bricks, shacks of tin sheeting, plywood, plastic or straw. Dwellings had often no more than dirt floors, and no insulation from sun, rain or snow. Some had a small ditch in the floor for the evacuation of rainwater. IOM visited survivors who used HSP

### Beneficiary account

Ioana was 72 years old. She lived in Romania, the country with perhaps the largest Roma population anywhere. Her village, Pietris, just south of the border with the Republic of Moldova, was a sprawl of shacks on two dusty ridges three-quarters of a mile uphill from the nearest public well.

In all, 53 beneficiaries lived there. Those lucky enough to have a farm worker's pension received US\$ 5 a month.

Ioana came to pick up her assistance package in the village "square", more of a sloping open space and livestock crossing.

She showed off the boots she received from the project last winter, and which had enabled her to replace the rags with which, even in deep snow, some Roma women still wrap their feet.

HSP's Coordinator had to insist on carrying Ioana's package for her; she said, and may have been right, that she was the stronger of the two. They hiked to her cabin, a collapsing, thatched structure made of mud and straw, lit by cooking oil received thanks to IOM's donors.



## Beneficiary account

**T**oma, 92-years old, lived with his wife in the Roma settlement of Smardioasa, 50 miles outside of Bucharest. They lived in a tent. They always have; except during the “deportation”, when they had spent three years in the open in Transdnistria, then walked the nearly 400 miles home after the war.

On the day IOM visited, Toma received his package of flour, cornmeal, rice, oil, canned meat and fish. He opened the meat immediately, and offered to share it.



cooking oil to light their homes. Some victims, in more traditional communities, lived in tents.

Elderly Roma tended to live with extended families, often ten persons under the same roof. Most did not have electricity, running water, sanitation or heating devices. Water came from communal wells that

might be a kilometre's walk away. Many Roma heated with makeshift, unventilated stoves, not only unpleasant and dangerous, but also inefficient.

For all Roma these conditions were at once painful and routine. Their dark, crowded and often squalid homes were hot in the summer, freezing in winter. Material assistance was a first priority for the majority. Basic healthcare, if NGOs could deliver it, was a welcome bonus.

Survivors typically sought multiple forms of assistance, including food packages, winter fuel, medical and legal help, emergency financial support, clothing and hygienic supplies. Material assistance was especially attractive to the poorest communities. Beneficiaries also requested home repairs and improvements, as well as medications they could not afford.

Communities in which victims lived responded to HSP in a variety of ways. Non-eligible Roma often expressed strong disapproval, while beneficiaries themselves expressed their gratitude and affirmed that the programme had provided a marked, if temporary, improvement in their situation. Recipients who understood that assistance was being extended in recognition of their wartime persecution were profoundly moved. IOM also observed that HSP assistance helped family budgets overall, releasing scarce resources for clothing or schoolbooks for grandchildren.

*Non-eligible Roma often voiced strong disapproval of HSP, while beneficiaries expressed their gratitude and affirmed that the programme made possible a marked, if temporary, improvement in their living situation.*

## Projects

The **Romanian Orthodox Church (ROC)**, through its Social Work Department “Church and Society”, delivered assistance for two years, reaching over 7,000 survivors. ROC worked through its national network of parishes, offering aid in 214 locations and 18 counties. Activities covered nearly half of Romania's territory. Beneficiaries received regular distributions of food, hygienic supplies, clothing, winter assistance, prescription medications and emergency financial support. The last was limited to the most vulnerable who frequently used it to pay for materials for home repair.

## Assistance breakdown and beneficiaries assisted

Type of assistance	% of beneficiaries receiving assistance	% of total project expenditure on assistance
<b>Material</b>		
Food (except food packages)	0.0	0.0
Food packages	92.7	40.9
Clothing	46.5	12.1
Winter assistance	92.7	29.3
Emergency financial support	36.1	2.4
Hygienic supplies	84.9	13.2
<b>Medical</b>		
Medical and/or dental assistance	11.5	1.9
<b>Non-material</b>		
Homecare	0.0	0.0
Legal assistance	5.8	0.2
Social assistance	0.0	0.0

ROC faced significant challenges, including resistance from Roma leaders who disagreed with HSP's strict focus on the elderly. Other Roma leaders sought to gain political capital through association with HSP. It was sometimes difficult for the Church to have access to communities. Much time and energy was needed, with help from public authorities and priests, to deliver aid. Beneficiaries interviewed by IOM reported a high level of satisfaction, despite persistent claims to the contrary from some community leaders.

ROC initiated HSP assistance in Romania, first operating in 11 counties throughout the south and southeast of the country. It relied on local Roma contacts to achieve community access and to help with deliveries. Still, other Roma tried to block assistance, either because they were unable to take credit for it, or ineligible neighbours angry at being excluded from aid.

The service provider took care to distribute assistance of equal value to all. Any individualization of aid could lead to grievances. In a few instances, these disagreements became violent and prolonged, requiring ROC to redirect its attention to other communities.

Given the large number of beneficiaries and the vast territory, monitoring in Romania was a considerable challenge. ROC's material assistance was standardized for most locations, making things somewhat easier. IOM found that for many beneficiaries food and winter assistance was a genuine "life-line". Medical and emergency financial support was personalized in accordance with identified, and IOM monitored, needs.





The need for a project extension became evident when a number of additional victims living in conditions of extreme poverty were found. The service provider recognized its limited capacity to address medical needs. Many Roma were not enrolled in the national healthcare system and ROC had no qualified staff to provide legal counselling or parallel medical services. IOM Bucharest encouraged the service provider to continue providing limited medical assistance in the form of prescription medicines.



The ROC project extension continued to focus on material assistance. It expanded the geographical coverage to cover about half of the country.

ROC sought to keep assistance fair and flexible. One beneficiary in the town of Targu-Jiu had his roof destroyed by a storm. He received building materials to repair his home. Others received the same level of support to pay back rent or old utility bills. A few survivors received wheelchairs which also offered them greater independence.

The Roma NGO **Ramses Foundation** helped 411 victims in Cluj County, northwestern Romania. For seven months this NGO regularly delivered food and hygienic packages, clothing, winter assistance and emergency financial support. Ramses worked closely with local authorities and Roma leaders.

At times this NGO, which was also busy with other projects, had difficulty meeting IOM accounting and reporting standards, and IOM Bucharest had to invest much time and effort in monitoring and support. IOM did not suggest a project extension.

The **OLTROM Association** was selected to distribute HSP assistance to 500 survivors in 11 locations in the extremely poor Olt County. After identifying survivors and their needs, OLTROM began to deliver food and hygienic packages, clothing, winter assistance and emergency financial support.

OLTROM reported that many victims in rural locations were living on pensions of less than US\$ 30. Most had worked as farm workers, tinkers or other craftsmen. Many were illiterate. Community members who could not be included in the project voiced their disenchantment.

The service provider had good community access and quickly overcame beneficiary suspicions, thanks to staff dedication and the NGO's good relations with municipal authorities.

OLTROM took care to make assistance equitable and flexible. It judiciously suspended assistance immediately before Romania's

*Houses were made of mud bricks, shacks of tin sheeting, plywood, plastic or straw. Dwellings had often no more than dirt floors, and no insulation from sun, rain or snow.*

national elections in November 2004 in order to prevent anyone from claiming credit for aid in an attempt to buy victims' votes.

As elsewhere, initial project activities attracted the attention of additional survivors. OLTROM estimated that there were up to 1,500 potential beneficiaries in Olt County alone. Project resources were insufficient and outreach was suspended in order not to arouse unrealistic expectations.

OLTROM's modest extension reached an additional 290 survivors. Medical care was added to material assistance and soon became very popular with elderly Roma survivors who may not have seen a doctor for years.

The service provider contracted with a local medical clinic to provide general check-ups, medications and specialist referrals. Clinic



physicians made an effort to ensure continuity of care after programme conclusion. Beneficiaries diagnosed with diabetes were referred to the National Diabetes Programme, entitling them to free medication. Clinic staff advised on hygiene, nutrition and the risks associated with smoking and alcohol consumption.

Following Dr. Friedrich Christian Flick's donation, OLTROM continued to collaborate with IOM for the delivery of further assistance to some of Romania's most vulnerable Roma victims until March 2006.

**ROMANITIN, the Roma Youth and Students' Association** operated four consecutive HSP projects for Roma beneficiaries in the poor northeastern corner of Romania. It supplied over 1,400 needy Roma survivors with food and hygienic packages, clothing and winter assistance in 46 locations in Iasi, Neamt, Suceava and Botosani Counties.

ROMANITIN began by bringing together its project team, Roma community leaders and representatives of local authorities for a series of meetings. To avoid misunderstandings and other obstacles, the NGO shared information about the project's purpose, target group and assistance.

ROMANITIN had some early problems with community access as, following earlier unfulfilled promises of aid, elderly Roma were suspicious.

In spite of the fact that the service provider was Roma, some other local leaders opposed the project and many younger Roma would not accept the focus on survivors only. ROMANITIN acknowledged the difficulty of helping only the elderly when entire settlements were very poor. Rival Roma leaders sought to exclude ROMANITIN's staff from their districts.

Some beneficiaries told IOM that assistance had raised their own status in the community. They also claimed that the regular supply of food, clothing and hygienic products had improved their health and well-being.



By the time of ROMANITIN's first project extension, most community members had accepted the rationale and limitations of HSP. This made matters much easier for the service provider.

ROMANITIN encountered substantial logistical challenges in winter. Harsh weather, poor roads and limited infrastructure in Roma settlements restricted mobility and delayed deliveries.

IOM temporarily suspended assistance when ROMANITIN experienced difficulties in record-keeping and internal controls. Activity was resumed after a detailed review of documentation and beneficiary interviews to verify delivery of aid.

ROMANITIN's final project extension began in August 2005. In two years of collaboration with IOM it had developed the capacity and skills necessary to offer Roma survivors sustainable assistance in the form of medical care and legal aid. Such assistance enhanced beneficiary awareness of available entitlements under the national social security system, as well as the understanding of existing channels to make their problems known and approach relevant agencies at the municipal and national level.

## Conclusion

Romania has possibly the largest Roma population of any HSP target country. On account of Romania's size and survivor numbers, IOM kept projects large, assistance simple and generally standardized. Only once many had been served and partner capacities tested and improved, could the programme afford to include healthcare and legal counselling.

HSP made considerable progress in Romania. It had begun with a non-Roma partner with a broad reach, but limited access to settlements. After three and a half years, HSP had helped a number of young Roma organizations lay the foundation for community advancement from within.

## Project overview

HSP project*	Beneficiaries	Assistance types	Start	End
Romanian Orthodox Church	3,000	Food packages, clothing, winter assistance, emergency financial support, medical and dental assistance, hygienic supplies	Sep 02	Aug 03
Romanian Orthodox Church (1 <sup>st</sup> revision)	7,036	Food packages, clothing, winter assistance, emergency financial support, hygienic supplies	Aug 03	Nov 04
Ramses Foundation	400	Food packages, clothing, winter assistance, emergency financial support, hygienic supplies	Jul 03	Oct 04
ROMANITIN – The Roma Youth and Students' Association	1,400	Food (except for food packages), food packages, clothing, winter assistance, hygienic supplies	Oct 03	Sep 04
ROMANITIN – The Roma Youth and Students' Association (1 <sup>st</sup> revision)	1,400	Food packages, clothing, winter assistance, hygienic supplies	Oct 04	Mar 05
ROMANITIN – The Roma Youth and Students' Association (2 <sup>nd</sup> revision)	1,412	Food packages, hygienic supplies	May 05	Jul 05
ROMANITIN – The Roma Youth and Students' Association (3 <sup>rd</sup> revision)	716	Food packages, medical and dental assistance, legal assistance	Aug 05	Jan 06
Oltrom Association	500	Food packages, clothing, winter assistance, emergency financial support, hygienic supplies	Apr 04	Jun 05
Oltrom Association (1 <sup>st</sup> revision)	711	Food packages, clothing, winter assistance, medical and dental assistance, hygienic supplies	Jan 05	Jun 05
<b>Roma and Sinti, total**</b>	<b>10,245</b>			

\* Initial projects and project extensions are listed separately.

\*\* Beneficiaries assisted under more than one project or extension are counted only once.

Note on project names: "Revision" denotes extension of an existing project.

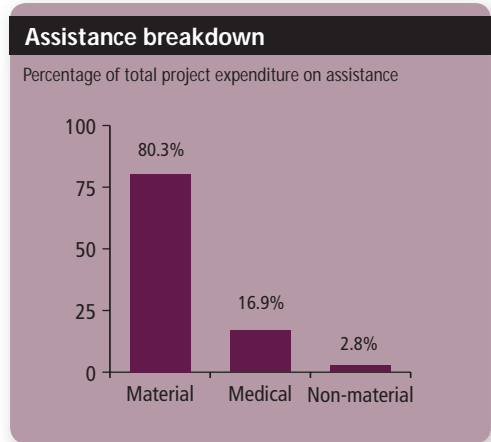




# The Russian Federation

**I**OM operated four HSP projects for Roma in the Russian Federation from June 2003 to September 2005. Service providers distributed assistance to 9,163 Roma survivors. Projects focused on victims living in areas occupied by Germany during the Second World War and where persecution had been especially severe.

Country snapshot	
Total beneficiaries	9,163
Men	48%
Women	52%
Service providers	4
Projects implemented*	4
Implementation period	Jun 2003-Sep 2005
Average project length*	18 months
*Initial project and extensions count as one.	



## Outreach

IOM Moscow began outreach in November 2002, looking for organizations experienced in humanitarian and social assistance and able to locate survivors. It distributed information on programme requirements and rationale to potential service providers throughout western Russia. IOM sought service providers able to cooperate with local organizations, as many Russian Roma live in closed communities. Three of the responding NGOs showed particular promise. IOM eventually cooperated with four Roma and pro-Roma partners.

## Beneficiaries

Roma living in the Russian Federation continue to suffer greatly from poor living conditions and racial discrimination. Many Roma homes lack even the most basic comforts. Low incomes make it impossible for the elderly to provide for themselves, making humanitarian assistance especially important.

Conditions are worst in isolated, Roma-only settlements and villages. In the Leningrad region, beneficiaries live in hamlets that are snowbound throughout the winter months and accessible only by horse-drawn sleigh. Their dwellings lack all utilities and stoves are stoked with



wood gathered by beneficiaries or family members in the surrounding forests. In contrast, Roma in large cities may live in apartments with central heating and electricity.

Nothing like HSP had reached Roma survivors before. Many were suspicious and at first refused any help, unable to believe that it would be free. IOM did not have much reliable information on survivor locations and numbers. Service providers found a much higher number of eligible victims than could be assisted with the available programme resources, and they often found themselves in the difficult position of having to select only the most vulnerable and to exclude others from assistance.

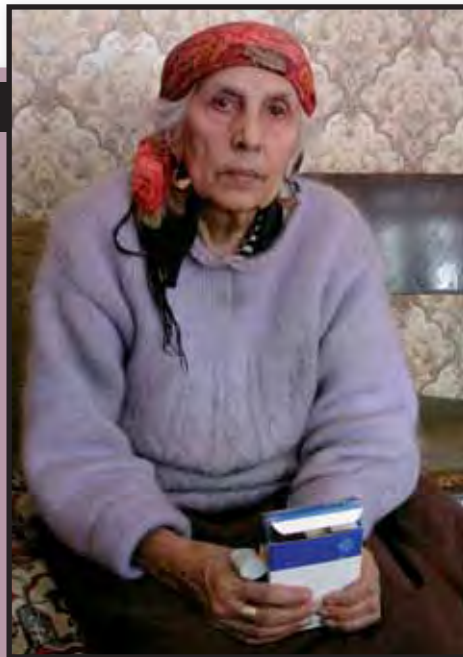
### Beneficiary account

The village of Vyritsa, in the Leningrad province, was snowbound during the long winter months, accessible only by horse and wagon. Many of the cabins there are empty until spring, when city dwellers from St. Petersburg are willing to “rough it”, at least for short periods, in their *dachas*.

Lidiya lived in Vyritsa, where only Roma spend the winter, heating and cooking with a wood-burning stove. There is no running water, though some suspended a bucket of snow to melt over a washbasin. Pensions of US\$ 18 a month were spent on tea, cheese, or maybe a sausage, to supplement meals of home-grown onions and potatoes.

Lidiya, her sister Raisa, along with several others from their village, benefited from medical assistance at a nearby outpatient clinic. The most common complaints of the survivors are heart, respiratory and orthopaedic problems.

IOM spoke with beneficiaries waiting to see the doctor. They told of their experiences in the German-occupied countryside during the “900-day” siege of Leningrad.



IOM heard tales of murdered and missing parents, of Roma buried alive.

With ever-deeper cuts in post-Soviet state services, healthcare is no longer automatic, even for the neediest. Thanks to HSP, Roma victims received transportation, basic medical and laboratory check-ups, medicines, dentures, and follow-up by a specialist, if needed.

## Projects

The **Charitable, Historical, Educational and Human Rights Non-Governmental Organization “Memorial” of St. Petersburg** had considerable experience working with Holocaust victims. One of its founders was a Jewish survivor of the Leningrad siege of 1941-1944. Memorial participated in the opening of the Holocaust Museum in St. Petersburg and had closely cooperated with international organizations to promote Roma rights in Russia.



## Assistance breakdown and beneficiaries assisted

Type of assistance	% of beneficiaries receiving assistance	% of total project expenditure on assistance
<b>Material</b>		
Food (except food packages)	0.0	0.0
Food packages	74.2	73.1
Clothing	0.0	0.0
Winter assistance	10.2	3.5
Emergency financial support	3.6	3.3
Hygienic supplies	4.1	0.3
<b>Medical</b>		
Medical and/or dental assistance	7.6	16.9
<b>Non-material</b>		
Homecare	0.0	0.0
Legal assistance	9.5	2.8
Social assistance	0.0	0.0

Memorial had already been monitoring the situation of Roma in northwestern Russia for two years, and, with local Roma mediators, had identified potential beneficiaries in St. Petersburg. It aimed to provide medical care and legal counselling, two areas in which it had extensive expertise.

Beneficiary suspicion delayed the project. Many were reluctant to disclose personal information. To overcome the distrust, Memorial published a booklet with information about the programme and photos of beneficiaries who had received assistance. Thanks to this, such scepticism could gradually be overcome and survivors began to call Memorial to be included in the programme.

Legal assistance focused first on helping beneficiaries to obtain tax identification numbers, a new requirement in Russia to access state healthcare. Beneficiaries needed to submit passports and other personal documents. Many still had Soviet passports that were no longer valid and had to be exchanged for Russian ones. Memorial worked with local authorities to speed up this process.

Medical assistance consisted of general and specialist check-ups and medication. House calls were found to be inefficient and time-

*Many survivors were suspicious and at first refused help, unable to believe that it would be free.*



consuming. Memorial decided to transport beneficiaries by minibus to a centrally located clinic. All beneficiaries were scheduled for two visits with follow-up as needed. Many had initially refused despite their obvious need, as they were unaccustomed to being welcomed at public facilities. For some medical care was a luxury and they did not believe such services would be free. Positive feedback from HSP's first patients attracted others.

Memorial extended project activities to include survivors in the Pskov region; however, medical authorities approached by Memorial refused to organize treatment for Roma. An interested private polyclinic was eventually located. The municipal dental clinic also refused to receive Roma patients and Memorial contracted with a private practice.

Several blind beneficiaries in the Pskov region had operations that helped them regain their sight. Others received prescription eyeglasses, and dentures. Some very ill victims had to be hospitalized. A nurse joined the medical team to visit beneficiaries in the Vsevolozhsk region and ensured that they took their medications properly, to check their blood pressure, administer injections and explain basic hygiene.

Memorial encountered hostility from some Roma communities. It had to withdraw from the Tosno region due to the local fear of outsiders, distrust and attacks against its staff.

Further project extensions ensured the inclusion of many beneficiaries who had initially been suspicious. Clinic visits continued as before and victims with chronic conditions continued their treatment. Memorial offered a broader range of legal services. Lawyers provided counselling on housing and estate matters and helped beneficiaries to obtain documents for a range of needs. Extensions came at a time when living conditions for the elderly continued to worsen because of cut-backs in Russian social care institutions and benefits.

HSP did much for Roma survivors in the Vsevolozhskiy area, where poverty and sanitary conditions were desperate. In addition to basic assistance, and in an attempt to overcome apprehensions about medical care, Memorial staff gave instruction in basic hygiene and health maintenance to survivors and their families. Beneficiaries said they had never had decent medical attention or legal assistance before. One survivor told IOM “We have seen so little good in our lives. It is so pleasant and unusual when someone takes care of you.”

The **Interregional Social Organization “Roma Association”** based in Volgograd had extensive experience with activities relating to Roma culture and folklore. Its initial HSP project delivered monthly food packages to 4,525 survivors in seven Russian regions. With support from partner organizations in Rostov, Astrakhan, Krasnodar and Stavropol, the service provider undertook extensive beneficiary identification activities, resulting in a much higher number of eligible survivors than originally anticipated.

*In the Leningrad region, beneficiaries live in hamlets snowbound all winter and accessible only by horse-drawn sleigh.*

Foodstuffs were purchased centrally and transported to each region, where mini-trucks were used to deliver them to beneficiary homes.

Once more, elderly Roma were suspicious of promised assistance. Neighbours who were not eligible sometimes reacted violently. In one settlement, a riot erupted during the first delivery and the truck was almost torn open. Throughout the project, community attitudes remained divided.

During one IOM monitoring trip it became apparent that the local project coordinator disagreed with, and did not intend to apply HSP eligibility criteria. As no other organization had community access in the Astrakhan region, assistance had to be shifted to another region with a similar number of eligible victims.

A project extension was necessary to reach 390 beneficiaries with a one-time delivery of coal for the winter. The distribution of assistance was sometimes hindered when survivors had temporarily moved in with relatives to save on heating costs, and could not be found. Most beneficiaries used the services of the project lawyer to prepare applications for medical insurance and for official documents. More Roma survivors came forward as the project progressed.

*Neighbours who were not eligible sometimes reacted violently. In one settlement, a riot erupted and the first delivery truck was almost torn open.*

The **Federal Ethnic Cultural Russian Roma Autonomy (FNKA)** had gained extensive experience throughout Russia by promoting Roma identity, language and culture, raising educational levels, broadening political participation and offering legal protection. Although untested in humanitarian assistance, FNKA knew where to find Roma.

The project covered a huge territory, stretching across western Russia and including 13 cities and their surrounding areas. Food was purchased in Moscow and delivered to 3,530 survivors. Project staff, and occasionally IOM, accompanied deliveries to local representatives who took them to beneficiary homes. The most vulnerable beneficiaries also received emergency support. Survivors were asked to indicate their assistance preferences, including adjustments in the contents of food packages. When deliveries began, the initial scepticism turned into gratitude.



*The NGO arranged for a few survivors to have temporary sanatorium care. Some of the poorest declined admission, embarrassed that they lacked decent shoes and clothing.*

Eligibility verification could be problematic for survivors whose official identification documents had been issued in the 1950s. Some Roma said outsiders had never helped them before. HSP had an emotional impact on elderly Holocaust survivors who had felt that no one knew or cared about them.

FNKA's project extension included winter and legal assistance for 880 Roma in places as yet uncovered. Moscow beneficiaries received legal counselling to help them cope with changes in Russian social services. FNKA produced a booklet with answers to common legal questions, including information on state allowances and samples of common requests for access to benefits.

The **Fund of Social Support of the Population of the Smolensk Region** provided support to socially vulnerable groups in Russia. Its initial project brought HSP assistance to 167 Roma beneficiaries in the Smolensk region. This consisted of medical care, winter assistance, hygienic supplies and emergency financial support (gas stoves and refrigerators).

Survivors were taken to polyclinics for medical check-ups. Prescribed medications were delivered to their homes. While many Roma beneficiaries overcame their reservations about mainstream care, others continued to put their trust in popular remedies. Survivors diagnosed with serious ailments, such as tuberculosis, diabetes and hypertension, received appropriate treatment. The service provider explained the benefits of treatment and proper use of medications.

The NGO arranged for a few survivors to have sanatorium care. These received therapy for cardiovascular, gastrointestinal and musculoskeletal diseases. Some of the poorest declined admission out of embarrassment that they had no decent shoes and clothing.





FNKA has continued to work with local authorities to meet the urgent needs of Roma communities in Smolensk.

## Conclusion

The living conditions of elderly Roma in Russia, especially those in rural areas, range from modest to extremely poor. Most have low incomes and only limited access to public services. HSP had a significant effect on survivors by improving their lives through better nutrition, medical care and counselling. IOM assistance also had a psychological impact on survivors whose past suffering was recognized for the first time.

Experienced service providers repeatedly expressed their distress at the indigent state in which many survivors lived. Food packages helped to prevent starvation and warm clothing, coal and firewood enabled families to survive the winter. Medical assistance was especially needed after the federal old-age benefits were replaced with monetary compensation, making free or subsidized care no longer available. HSP assistance also helped to break the loneliness and despair of the survivors it was able to reach.

IOM's contacts with beneficiary communities throughout western Russia revealed that many survivors were not aware of, or did not receive the benefits to which they were entitled. Service providers drew the attention of state authorities to the living conditions and needs of elderly Roma.

HSP provided a wide range of assistance in Russia. Projects covering several regions and great numbers of victims received standardized material assistance. Those serving fewer Roma were able to give individualized, non-material care.

HSP allowed IOM to gauge the numbers, locations and needs of Roma. Partners found far more victims than they could assist. Most have expressed interest in continuing to help, but will most likely lack the resources following HSP's completion. IOM Moscow continues to seek funding sources with which to assist this most vulnerable segment of the Russian population.



## Project overview

HSP project*	Beneficiaries	Assistance types	Start	End
St. Petersburg "Memorial"	105	Medical and dental assistance, legal assistance	Jun 03	Mar 04
St. Petersburg "Memorial" (1 <sup>st</sup> revision)	208	Medical and dental assistance, legal assistance	Apr 04	Oct 04
St. Petersburg "Memorial" (2 <sup>nd</sup> revision)	216	Medical and dental assistance, legal assistance	Nov 04	May 05
St. Petersburg "Memorial" (3 <sup>rd</sup> revision)	208	Medical and dental assistance, legal assistance	May 05	Aug 05
Interregional Social Organization "Roma Association"	4,525	Food packages	Sep 03	Oct 04
Interregional Social Organization "Roma Association" (1 <sup>st</sup> revision)	390	Winter assistance	Dec 04	Feb 05
Interregional Social Organization "Roma Association" (2 <sup>nd</sup> revision)	385	Medical and dental assistance, legal assistance, hygienic supplies	Mar 05	Aug 05
Federal Ethnic-Cultural Russian Roma Autonomy	3,530	Food packages, emergency financial support	Apr 04	Apr 05
Federal Ethnic-Cultural Russian Roma Autonomy (1 <sup>st</sup> revision)	880	Winter assistance, legal assistance	Apr 05	Sep 05
Fund of Social Support of the Population of the Smolensk Region	167	Winter assistance, emergency financial support, medical and dental assistance, hygienic supplies	Oct 04	Jun 05
Fund of Social Support of the Population of the Smolensk Region (1 <sup>st</sup> revision)	65	Medical and dental assistance	Jun 05	Sep 05
<b>Roma and Sinti, total**</b>	<b>9,163</b>			

\* Initial projects and project extensions are listed separately.

\*\* Beneficiaries assisted under more than one project or extension are counted only once.

Note on project names: "Revision" denotes extension of an existing project.