PROVIDE UNIVERSAL AND NEEDS-BASED PROTECTION FROM SOCIAL AND ECONOMIC RISKS

THE ISSUE:

84% of poverty remains in rural areas, with significant non-monetary issues - vulnerable families in rural areas have limited or no access to basic social protection services, or adequate water and sanitation.

The overall targeting accuracy of social assistance spending remains low, while pensions do not provide adequate levels of benefits for the elderly.

The share of public expenditure for social benefits in GDP was 13.0% comparing to EU average of 18.6%.

CHILD DISCIPLINE METHODS



76%

of children 2-14 years of age experienced a violent method of discipline



48%

of children 2-14 years of age were subjected to physical punishment



69%

of children 2-14 years of age were subjected to psychological aggression

Over 4,000 children and 2,000 adults still live in long-term residential care institutions, deprived of a family environment or the right to independent living and social inclusion. The majority of these children and adults are persons with disabilities. Completing deinstitutionalization process is in line

KEY FIGURES:

- Expenditures on social protection are below EU level and efficiency remains low.
- 80% poverty remains in rural areas, where availability of social services remains scarce.
- Over 4,000 children and 2,000 adults remain institutionalized.

with obligations Moldova took under the Convention on Rights of Persons with Disabilities (CRPD) and the Convention on Rights of Children (CRC).

Many children and women suffer from violence in their families, yet there are few State-funded services for the victims of violence. Development of these services is necessary to meet obligations under the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), CRC and other international obligations.

PROGRESS MADE:

- Moldova is in the process of reforming the social protection system by implementing major reforms: from categorical cash benefit system

 to means tested scheme, from residential service delivery system to independent living approach, from a defectology disability approach to defining the degree of ability.
- Over the last decade public expenditure on social protection increased steadily from MDL 2.6

billion in 2003 to about MDL 11.6 billion in 2012, of which on average 70% was for social insurance and 30% for social assistance.

- In 2009 the means tested cash benefit was introduced, expanding to 80,000 beneficiaries (households) in 2012, with a significant impact on reducing extreme poverty; in 2011 the second component of the scheme was introduced payment for the winter period for poor households, reaching 120,000 households.
- The effectiveness of child benefits is noticeable. Poverty reduction due to child benefits reaches as much as 5.2 percentage points for households with children under 2 years, although it is weaker for households with older children. Effectiveness of disability social assistance benefits, however, remains low.
- Co-payments for visits to physicians, including children, were abolished by the Ministry of Health.

WHAT REMAINS TO BE DONE:

- Improve the efficiency of the social protection scheme to ensure that measures reach all people in need.
- Eradicate remaining informal payments in the health and education systems (the extent of out-of-pocket payments has been marginally reduced but is still significant at above 45 percent of total households' expenditures on health care).
- Ensure access for all vulnerable groups including the poor, Roma, elderly and persons with disability to social payments and social services.
- Put in place state funded services for victims of violence.
- Adjust policies and funding mechanisms to support the transition from institutional care to community-based services, in response to the needs of the deinstitutionalized adults and children with disabilities.

HOW TO ACHIEVE IT:

- Improve access to services (education, health social services and communal services) at the local level, especially for women and the most vulnerable.
- Pursue fiscal decentralization reform
- Improve targeting through fine-tuning of the Means-Tested Cash Benefits scheme as well as, where necessary, using other available local, regional and national funding to reach particularly excluded persons and groups.
- Professionalize social work and ensure accreditation of social services providers throughout the country.
- Continue de-institutionalization process though creation of alternative services (foster care, adoption, community services) and raising awareness about (dis)ability.
- Improve efficiency and transparency of the social safety net through reliable disaggregated data and by introducing an integrated information system, which aims at cumulating the information on delivery of all benefits.

References:

- Over 4,000 children and 2,000 adults remain institutionalized: Transmonee database (http://www.transmonee.org/) and Anuarul Statistic al Republicii Moldova (http://www.statistica.md/pageview.php?l=ro&idc=263&id=2193);
- 80% of poverty incidence: Nota Informativa saracia in Republica Moldova in 2013, Ministry of Economy, 2014; (http://www.mec.gov.md/ro/content/impactul-saraciei);
- 13.0% expenditure for social benefits in GDP: Improving Public Expenditure Efficiency for Growth and Poverty Reduction - A Public Expenditure Review for the Republic of Moldova, World Bank;
- MDL 2.6 billion in 2003 to about MDL 11.6 billion in 2012 public expenditure on social protection: State Budget of the Republic of Moldova 2003 to 2012, Ministry of Finance (http://mf.gov.md/TranspDeciz/ProiecDeciz/bs2014);
- 80,000 beneficiaries of the means tested cash benefit scheme: Raportul Social Anual 2012, MMPSF (http://mpsfc.gov.md/md/rapoarte/);
- 6. 5.2 percentage points in child poverty reduction due to benefits: Study on efficiency of the social safety net in Republic of Moldova, World Bank, 2012.