



Report
of Alliance of Organizations for Persons with Disabilities from Republic of Moldova
in the context of the third cycle of the Universal Periodic Review of Respect for Human Rights

1. Context:

- 1.1. The Government of the Republic of Moldova has initiated the implementation of a significant number of social policies in the field of inclusion, deinstitutionalization, development of social services, education, and employment of persons with disabilities, as well as amending legislation to increase the rights of persons with disabilities.
- 1.2. However, despite this, people with disabilities and their families remain the most vulnerable and underrepresented group in the Republic of Moldova. Currently, the number of people with disabilities in the Republic of Moldova is 177.0 thousand people, including 10.7 thousand children aged 0-17 years¹, representing 6.7% of the total population of the country, and children with disabilities - 1.9% of the total number of children, according to official statistics.
- 1.3. The problems that people with disabilities and their families face are: poverty; family income consists largely of social benefits, the amount of which is much lower than the minimum consumption basket; access to public services; low number of social services for the support and living in the community of people with disabilities; accessing education services at all levels of education as well as employment; accessing rehabilitation and sanatorium services; providing assistive equipment and technologies; ensuring the accessibility of infrastructure, public transport at national level and information. In 2019, the average size of the disability pension made it possible to cover the subsistence minimum in the proportion of 70.4%. The average size of the severe disability pension covered the subsistence minimum in the proportion of 86.8%, the average size of the accentuated disability pension - 75.9%, and of the average disability pension - 48.6%.²
- 1.4. The situation and problems of people with disabilities worsened with the pandemic crisis, due to the fact that they needed more social support, given that access to health and social services was limited and spending increased, according to the study "The impact of the Covid-19 pandemic on people with disabilities"³, made by the Keystone Association and the Alliance of Organizations for People with Disabilities in the Republic of Moldova.

2. Domain 8. The right to education

- 2.1. During the years 2011-2020, the Inclusive Education Development Program was implemented, through which support services for inclusive education were developed: resource centers for inclusive education, support teachers, psycho-pedagogical assistance services.
- 2.2. An entire objective regarding access to education is also included in the National Program for Inclusion of Persons with Disabilities GD no.723 from 08.09.2017⁴. According to the National Center for Social Assistance, about 10,000 children with special educational needs are included in general education institutions (schools, kindergartens). It is to be appreciated that educational inclusion has been piloted

¹ <https://statistica.gov.md/newsview.php?l=ro&idc=168&id=6827>

² <https://statistica.gov.md/newsview.php?l=ro&idc=168&id=6827>

³ <http://incluziune.md/wp-content/uploads/2020/06/STUDIUL-IMPACTUL-PANDEMIEI-PERSONE-CU-DIZABILITATI.pdf>

⁴ https://www.legis.md/cautare/getResults?doc_id=101863&lang=ro

both at pre-school level and at the vocational/professional level, by developing the training of specialists and initiating the adaptation of the legal framework for the extension of educational support services to these two stages.

- 2.3. According to the Joint Evaluation Report of the Inclusive Education Program for 2011-2020, conducted by UNICEF⁵, the field of educational inclusion is still under development and requires human resources capacity and financial resources for quality and sufficient services, transportation adapted for the movement of children with locomotor disabilities to schools and physical adaptation of school spaces, including toilets. On the other hand, children with sensory disabilities need increased attention, by providing them with equipment and assistive technologies to be able to participate in the educational process, both physically and online, the development of support services able to use Braille communication systems and sign language, as well as providing teaching materials for children with sensory disabilities.
- 2.4. According to the Monitoring Report of the 2019 Action Plan of the Inclusive Education Development Program for 2011-2020⁶, out of 37 planned actions, only 54% were completed. The case study for Anenii Noi raion, regarding the implementation of the Program at local level identified the following gaps: the insufficiency of financial resources for inclusive education, which constitutes about 2% of the local budget. These resources are limited and do not fully cover the necessities of the support teacher service of all children during lessons, and are not sufficient for the current expenditure of the Resource Centers for Inclusive Education. At the same time, parents mentioned that they need more involvement and support from the support teacher, who currently provides support for 10 children with medium special educational needs, and in the case of children with more severe disabilities provides support for 5 children. But for children with Autism Spectrum Disorders (ASD) who need individual support this formula it's not sufficient.
- 2.5. During 2018, AOPD monitored the accessibility of 11 Centers of Excellence. The results of the monitoring showed that only one of this Professional Center of Excellence is adapted for the free movement of people with locomotor disabilities, but the spaces around the buildings and dormitories are not adapted⁷.

2.6. Recommendations:

- 2.6.1. Allocation of sufficient financial resources for the development of services and the creation of conditions for inclusive education, depending on the number of children with special educational needs who need support;
- 2.6.2. Ensuring adapted transport for the movement of children with locomotor disabilities to educational institutions;
- 2.6.3. Physical adaptation of educational institutions, at all levels of education; Diversification of educational support services to meet all the support needs of children with special educational needs;
- 2.6.4. Modification of the teaching norm of support teachers to ensure the necessary support in the educational inclusion of TSA children;
- 2.6.5. Providing children with sensory disabilities with support services and assistive equipment, so that they participate in the learning process;
- 2.6.6. Continuous training of teachers and support teachers, in order to work with children with various disabilities and the use of communication systems and assistive technologies;
- 2.6.7. Providing educational institutions with psychologists and speech therapists;
- 2.6.8. Continuous monitoring of the process of educational inclusion of children with SEN, by ensuring the transition from one level to another, in order to avoid further difficulties for children at the stage of vocational training and independent living;

⁵ <https://www.unicef.org/moldova/rapoarte/evaluarea-comun%C4%83-implement%C4%83rii-programului-de-dezvoltare-educa%C8%9Biei-incluzive-anii-2011>

⁶ <http://incluziune.md/wp-content/uploads/2021/02/Raport-de-monitorizare-a-Planului-de-actiuni-pentru-2019-in-baza-Programului-de-dezvoltare-a-educatiei-incluzive-in-RM.pdf>

⁷ <http://aopd.md/raport-de-evaluare-si-analiza-tehnica-a-centrelor-de-excelenta-din-subordinea-ministerului-educatiei-culturii-si-cercetarii/>

- 2.6.9. Inclusion of resilience measures in education policies, in order to ensure access to education for children with disabilities in times of crisis.

3. Domain 9. The right to health

- 3.1. The national program for the social inclusion of people with disabilities includes objective 3 which provides for increasing the access of people with disabilities to quality medical, rehabilitation and rehabilitation services. Following the monitoring process of this objective, we attested the following problems⁸:
- 3.2. Providing people with severe disabilities with consumables, dressings, syringes, diapers and other essential care products;
- 3.3. Accessing medical services, given the lack of adapted transport, at the country level, and the conditions of accessibility of medical centers, which operate inside old buildings;
- 3.4. Access to reproductive health services for women with disabilities: only in some districts there are adapted gynecological chairs, and the staff needs training to provide services to the beneficiaries;
- 3.5. Rehabilitation services are insufficient to cover the number of requests, and the waiting line for sanatoria tickets is common to that of the elderly. Thus, people with disabilities have difficulty accessing rehabilitation services, on a regular basis, once every three years, and often refuse the ticket due to the lack of adapted public transport to travel to sanatoriums;
- 3.6. Increased attention needs to be paid to the development of early intervention services throughout the country and to inform parents about these services. The situation is alarming: the number of children with autism spectrum disorders is increasing, and the services available nationwide are not enough.

3.7. Recommendations:

- 3.7.1. Annual accessibility of medical institutions, according to the needs of people with physical and sensory disabilities and construction standards and norms: <http://www.ednc.gov.md/>;
- 3.7.2. Creation of two separate waiting lists for rehabilitation and rehabilitations services: one for people with disabilities and another for the elderly;
- 3.7.3. Reimbursement of the cost of the sanatorium ticket, in case of impossibility to travel to the sanatorium services;
- 3.7.4. Inclusion of medical consumables (stomas, dressings, diapers) for people with severe locomotor disabilities, in the list of compensated drugs;
- 3.7.5. Development of early intervention services at national level.

4. Domain 10 The right to work and social protection

- 4.1. During the years 2017-2020, the Republic of Moldova has attested several successes in promoting the employment of people with disabilities:
- 4.1.1. Implementation of the National Employment Strategy 2017-2021⁹;
- 4.1.2. Elaboration a new Law Nr. 105 on the promotion of employment and unemployment insurance which includes definitions and new measures to stimulate the employment of people with disabilities¹⁰;
- 4.1.3. Approval of the Regulation and quality standards for assisted employment services¹¹.
- 4.2. At the same time, the situation and quality of life of people with disabilities remains difficult, given that employers are not sufficiently prepared to employ people with disabilities and need information and training.
- 4.3. People with disabilities need support for employment, employer identification, support for adaptation stages, etc., which still motivates them to act. Assisted employment services need to be developed at national level, and territorial agencies do not have sufficient training and human resources to respond

⁸ http://incluziune.md/wp-content/uploads/2020/02/Anexa_17_Raport-monitorizare-O2-si-O3--PNISPD_FV-.pdf

⁹ https://www.legis.md/cautare/getResults?doc_id=98639&lang=ro

¹⁰ https://www.legis.md/cautare/getResults?doc_id=105474&lang=ro

¹¹ https://www.legis.md/cautare/getResults?doc_id=126655&lang=ro

to this demand. Thus, the solution would be for these services to be developed by civil society organizations and contracted by the state.

- 4.4. People with disabilities do not know what their abilities are and what would be the right positions for employment and vacancies. Under these conditions, it is necessary to develop career guidance services such as young people / people with disabilities. One possibility to overcome the learning barriers of the profession is to apply the dual education methodology, and to adapt the educational offer to the demand of the labor market.
- 4.5. A serious problem remains the situation of parents of people with severe disabilities in old age, whose pension was not calculated by including period 1999-2017 after the changes of Law. Although the National Council for Prevention of Discrimination and Ensuring Equality found this to be discriminatory¹², the authorities did not initiate procedures to amend the legislation.

4.6. Recommendations:

- 4.6.1. Implementation of information campaigns for employers and people with disabilities for the use of measures to stimulate employment;
- 4.6.2. Planning sufficient financial resources for the procurement of assisted employment services developed by civil society organizations, accredited on these services;
- 4.6.3. Development of the system of career guidance services for people with disabilities;
- 4.6.4. Reviewing occupational standards in order to diversify and adapt qualifications for the training of people with disabilities;
- 4.6.5. Applying dual education and promoting positive practices in the case of vocational training for people with disabilities;
- 4.6.6. Amendment of the Pensions Law to include the period 1999-2017 in the calculation of pensions for parents of people with severe disabilities.

5. Domain 14. Rights of persons with disabilities

- 5.1. Monitoring the implementation of the Social Inclusion Programs for people with disabilities for 2017-2022, the National Program for deinstitutionalization of people with disabilities, monitoring compliance with national legislation in the social field, conducted by the Alliance of Organizations for People with Disabilities, revealed the barriers faced by the authorities and responsible institutions, which influences the low degree of implementation of policy actions and, respectively, the low impact on improving the quality of life of people with disabilities.

5.2. These issues are:

- 5.2.1. The financial resources indicated in the social policy documents are not fully found in the annual and medium-term budgetary policies;
- 5.2.2. Local authorities do not have sufficient financial resources for the development of services, given the decentralization of local budgets from the national budget;
- 5.2.3. Local authorities do not have sufficient human resources and capacity to implement national policies at local level, to monitor and report results;
- 5.2.4. Poor participation of people with disabilities in all walks of life and limited access to public, social, educational and medical services. Thus, according to the study "Analysis of accessibility conditions of public buildings in Falesti, Calarasi and Cahul districts"¹³, conducted by the Alliance of Organizations for People with Disabilities, only one public building is accessible, another 112 are partially accessible, and the remaining 356 buildings are inaccessible to people with reduced mobility;
- 5.2.5. The lack of adapted transport at national level is another major problem, which limits the free movement and movement of people with disabilities in case of need. The state provides compensation to people with disabilities for transport costs, but this does not cover the needs, given that national public transport is not adapted and taxi services are expensive;

¹² http://egalitate.md/wp-content/uploads/2016/04/Decizie_constatare_85_2018.pdf

¹³ <http://incluziune.md/wp-content/uploads/2021/02/StudiuAnalizaConditieiAccesibilitate.pdf>

- 5.2.6. The impossibility of ensuring the independent living of visually impaired persons is also conditioned by the insufficiency of equipment and assistive technologies, of insurance services with visual equipment as well as services of service and repair of visual equipment. The state contracts the services of a non-profit organization that provides visual aids, but these are not enough to cover all needs at the country level;
- 5.2.7. A big problem is the provision of wheelchairs for children with locomotor disabilities and people with complex disabilities, according to individual needs and age.

5.3. Recommendations:

- 5.3.1. Increased attention and monitoring by the State Chancellery on the process of implementing social inclusion policies, allocating sufficient resources for the planned actions;
- 5.3.2. Support to local authorities in implementing policies by training human resources, developing clear monitoring frameworks and collecting data for reports;
- 5.3.3. Allocation of sufficient resources for the development of social services for people with disabilities from the state budget, in accordance with the recommendations of the Baseline Study on social services for people with intellectual and psychosocial disabilities and children from vulnerable groups¹⁴;
- 5.3.4. Stimulating the process of deinstitutionalization of people with mental disabilities and developing alternative community services;
- 5.3.5. Development of services for the provision of visually impaired persons with assistive equipment and allocation of resources for their acquisition according to national needs;
- 5.3.6. Allocation of sufficient resources to provide children and people with disabilities with wheelchairs, according to individual needs and age;
- 5.3.7. Strengthening the verification mechanism regarding the assurance of the accessibility conditions for the new public buildings and the elaboration of the standards for the adaptation of the old buildings. Applying the sanctions provided by law for not ensuring the conditions of accessibility to infrastructure, roads, etc;
- 5.3.8. Improving the legal framework and mechanisms for the procurement of public transport, in order to ensure a relevant percentage of transport adapted for the movement of people with disabilities, including people with reduced mobility, at national level.

¹⁴ <http://incluziune.md/wp-content/uploads/2020/02/Studiu-de-tip-baseline-privind-serviciile-sociale-destinate-persoanelor-cu-dizabilitati-intelectuale-si-psiho-sociale-si-copilor-din-grupuri-vulnerabile.pdf>