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Summary prepared by the Office of the High Commissioner for Human Rights in accordance with paragraph 15 (c) of the annex to Human Rights Council resolution 5/1

Republic of Moldova*

The present report is a summary of 18 stakeholders' submissions[1] to the universal periodic review. It follows the structure of the general guidelines adopted by the Human Rights Council. It does not contain any opinions, views or suggestions on the part of the Office of the United Nations High Commissioner for Human Rights (OHCHR), nor any judgement or determination in relation to specific claims. The information included herein has been systematically referenced in endnotes and, to the extent possible, the original texts have not been altered. Lack of information or focus on specific issues may be due to the absence of submissions by stakeholders regarding these particular issues. The full texts of all submissions received are available on the OHCHR website. The report has been prepared taking into consideration the four-year periodicity of the first cycle of the review

* The present document was not edited before being sent to United Nations translation services.

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I. Background and framework

A. Scope of international obligations

1. The International Organization for Migrations (IOM) noted that the Republic of Moldova had not ratified the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families.[2]

2. European Commission against Racism and Intolerance of the Council of Europe (CoE-ECRI) recommended that the Republic of Moldova make the declaration provided for in Article 14 of the International Convention on the Elimination of All Forms of Racial Discrimination (CERD).[3]

B. Constitutional and legislative framework

3. IOM stated that the Constitutional provision granted the rights and freedoms to the citizens and thus, implied a differential treatment for citizens and non-citizens. IOM considered that the Constitution should be changed to ensure the universality of human rights.[4]

4. Joint Submission 1 (JS1) expressed concern that despite the improvement of the legal framework, the implementation of the majority of them, including the action plans were not fully supported financially.[5]

5. Joint Submission 2 (JS2) and the Human Rights Information Center (HRIC/CIDO) reported that the Republic of Moldova had undertaken to adopt a Law on Preventing and Combating Discrimination within the NHRAP 2004-2008, but the law had not been adopted yet.[6] Roma National Centre (CNR) recommended that the Republic of Moldova adopt comprehensive anti-discrimination law in conformity with international and European standards.[7] Equal Rights Trust (ERT), JS2, Joint Submission 3 (JS3), HRIC/CIDO, the Committee of Ministers of the Council of Europe (CoE-CoM) and the Advisory Committee on the Framework Convention for the Protection of National Minorities (CoE-ACFC) made similar recommendation.[8]

C. Institutional and human rights infrastructure

6. The Center for Human Rights of the Republic of Moldova (CHRM) explained that the Parliament appointed four Ombudspersons, who were entitled with equal rights and one of them was specialized in the protection of the child's rights.[9] CoE-ECRI recommended that the Republic of Moldova guarantee that the Ombudspersons' decisions are implemented, and provide the institutional with all the means and resources it needs to carry out its various tasks.[10]

7. CHRM indicated that the Ombudspersons had been assigned the mandate of the National Torture Prevention Mechanism (NPM).[11] In this respect, AI expressed concern that the NPM lacked both financial resources and independence.[12] Joint Submission 3 (JS3) noted the lack of efficiency of the NPM.[13]

D. Policy measures

8. IOM mentioned that a new National Human Rights Action Plan (NHRAP) was being elaborated for 2011–2014, as the previous action plan ended in 2008. It also noted the National Plans on Migration and Asylum (2010–2011) and on Prevention and Combating Trafficking in Human Beings and Domestic Violence (2010–2011), and the National Program on Gender Equality (2010–2015).[14]

9. CoE-ACFC reiterated its concern about the reported lack of effective implementation of many elements of the Action Plan for the Roma for 2007–2010.[15] CoE-CoM noted that the implementation of the Action Plan could have benefitted from the allocation of greater resources.[16] CNR made similar observations.[17] JS2 and CNR recommended that the Republic of Moldova adopt a new Action Plan to support Roma and allocate financial resources for its implementation.[18]

II. Promotion and protection of human rights on the ground

A. Cooperation with human rights mechanisms

10. JS1 reported that the issues raised by the Committee on the Rights of the Child were not implemented in the domestic legislation since 2009.[19]

11. IOM indicated that the Republic of Moldova overall undertook timely reporting under international treaty bodies and ensured the visits by Special Rapporteurs on torture and violence against women.[20]

B. Implementation of international human rights obligations

1. Equality and non-discrimination

12. ERT noted that the 2006 Law on ensuring equal opportunities for women and men defined direct and indirect discrimination and prohibited discrimination on the grounds of sex. However, it failed to establish a mechanism through which victims could seek remedies.[21] CHRM also noted the lack of an efficient mechanism for the implementation of the Law.[22] JS2 recommended that the Government establish a functional mechanism for implementing the Law.[23]

13. JS2 reported that the Roma faced widespread and systematic discrimination when accessing employment, education, health care and social services.[24] Similarly, CoE-CM mentioned that many of the Roma continued to live in isolated settlements in substandard housing and extreme poverty conditions, and had low rates of participation in the education system, and they often faced discrimination and sometimes hostile societal attitudes.[25]

14. CoE-ACFC expressed concern that some media were fuelling intolerance, and sometimes hatred. Furthermore, stereotypes, prejudices and sometimes hate speech against the Roma, Jews and foreigners continued to be disseminated by the media.[26] Similarly, Information Centre GENDERDOC-M (GENDERDOC-M) indicated that threats and incitements to violence against LGBT people in oral discourses, as well as within various internet forums and websites, were frequent and that complaints sent to Prosecutor General's Office with the request to stop hate speeches did not have any positive outcome.[27] JS2 reported that anti-Semitic hate speeches and vandalism were not investigated.[28] CoE-ACFC recommended that the Government combat the dissemination of stereotypes or intolerant speech by the media and prosecute and sanction cases of hate speech.[29]

15. GENDERDOC-M mentioned that lesbian, gay, bisexual and transgender (LGBT) community faced intolerance and was deprived of equal rights.[30] Joint Submission 4 (JS4) stated that some state officials opposed the integration of sexual orientation as a ground of discrimination in the draft Anti-Discrimination Law and that a pressure had been also exercised by the Orthodox Church and some civil society groups against that inclusion.[31]

16. Furthermore, CNR pointed out that the Roma faced discrimination in the judicial system, including as victims pursuing justice for violations perpetrated against them. It also stated that legal protection against racial discrimination was inadequate and did not provide an effective remedy and that the Action Plan for the Roma for 2007–2010 did not foresee specific measures to combat racism and racial discrimination against the Roma.[32]

17. COE-ECRI recommended that the Government effectively combat manifestations of religious intolerance by members of the majority population or harassment by the police and other authorities against members of some religious groups.[33]

18. The Center for Legal Assistance for Persons with Disabilities (CLAPD) indicated that persons with disabilities were excluded from social life.[34] The Association for the Support of Children with Convulsive Syndrome (ASCCS) reported on the stigmatization of children with convulsive syndrome, epilepsy and their segregation and exclusion from social life.[35]

2. Right to life, liberty and security of the person

19. AI indicated that, despite some positive steps, torture and other ill-treatment in police custody remained routine.[36] JS3 also reported about the regular use of torture and ill-treatment by law enforcement officers in order to extract confessions.[37] In particular, AI referred to allegations that many protestors who were detained by police during the demonstrations following the 2009 elections had been subjected to beatings and other forms of ill-treatment.[38] Similarly, the Commissioner for Human Rights of the Council of Europe (CoE-Commissioner) expressed concern that more than three hundred persons arrested in the context of or following the 2009 protests were subjected to ill treatment by police.[39] AI concluded that the post-elections' events of 2009 demonstrated that existing safeguards against torture and ill-treatment were ineffective in practice.[40]

20. CoE- Commissioner recommended that decisive action to be taken to adopt and enforce a firm attitude of "zero tolerance" of ill-treatment throughout the criminal justice system.[41] JS3 recommended that the Government abolish the statute of limitations for crimes of torture and transfer police detention facilities from the jurisdiction of the Ministry of Internal Affairs to the Ministry of Justice.[42]

21. JS3 reported about systematic harassment, including instances of ill-treatment by police and about the failure to prosecute the complaints of the Roma against police. JS3 recommended that the Government stop the harassment against the Roma and effectively investigate complaints submitted by the Roma.[43]

22. GENDERDOC-M referred to documented cases of attacks on LGBT persons on streets, in public places and even in their own families. It also mentioned cases when victims had been sexually harassed by law-enforcement authorities and indicated that some policemen were threatening and blackmailing LGBT persons. It recommended the investigation of all cases of harassment and blackmail against LGBT persons by police officers.[44]

23. The European Association of Jehovah's Christian Witnesses (TEAJCW) reported that cases of verbal and physical abuse continued to occur against Jehovah's Witnesses. It stated that attacks which occurred in 2009 had never been prosecuted by the police despite complaints filed.[45]

24. The Moldovan Institute for Human Rights (IDOM) reported that the significant number of persons in psychiatric institutions were deprived of their liberty, hospitalized and treated without a court order or their free consent. It also pointed out that persons were hospitalized for life without a court order in the psycho-neurological boarding houses.[46]

25. IDOM urged the Republic of Moldova to monitor and evaluate the existing conditions, the standards of medical treatment and the situation in psychiatric hospitals and psycho-neurological institutions and to eliminate all forms of torture and the practice of forced abortions.[47]

26. ASCCS stated that autistic children were placed in psychiatric wards for the most serious mentally ill children where they were tortured by tying them to the bed or were beaten with hard objects.[48]

27. CHRM noted the failure of authorities to ensure adequate conditions of detention, and adequate quality of medical services, although there was a positive dynamic in the prevention of ill-treatment.[49]

28. ERT mentioned that the 2010 amendments to the Criminal Code established domestic violence as a criminal offence and that the 2008 Law on Preventing and Combating Domestic Violence introduced the protection order so the court could apply measures for the protection of the victims of domestic violence. However, ERT underlined that there had not been notable improvements in the protection of victims because of inadequate enforcement of those new provisions. In particular, ERT noted the delays and refusal in issuing protection orders by judiciary and the failure to enforce protection orders by relevant public officials. ERT recommended the effective enforcement of the existing legislation intended to protect women from domestic violence.[50]

29. Furthermore, JS3 recommended that the Government ensure effective investigation by police of complaints submitted by the victims of domestic violence.[51] IOM recommended that the Government expand the number, coverage and capacities of shelters for victims of domestic violence.[52]

30. IOM reported that vulnerable women and girls remained at risk of trafficking for sexual exploitation, while an increasing number of men were exposed to trafficking for labor exploitation purposes.[53] IOM noted the poor capacity of law enforcement agencies in identifying the victims and in investigating cases.[54] Furthermore, JS3 pointed out the failure to prosecute, convict or punish high ranking public figures who were complicit in human trafficking.[55]

31. IOM noted that children were trafficked for forced labour and begging in neighbouring countries.[56] Similarly, JS1 highlighted that the percentage of children victims of trafficking was continuously growing. It recommended that the Government develop and support community services for children victims of abuse, neglect and trafficking.[57]

32. JS1 reported on the problem of child labour and indicated that the overwhelming majority of working children were unpaid family workers performing agricultural work within household-based establishments.[58] JS1 recommended that the Government take immediate actions for the elimination of child labour.[59]

33. Furthermore, CNR noted that the deep impoverishment of Roma families forced many children to start working at the age of 9–10 years old and that exploitation of Roma children for earning profits and for begging had long been an issue. CNR expressed its concern about the fact that authorities did not undertake any measure to stop this phenomenon and to sanction the exploitation of children involved in begging.[60]

34. JS1 stated that the violence against children occurred in many forms and referred to reported cases of physical and psychological abuses within families and at school, including

sexual abuse. It recommended that the Government secure educated staff in all sectors dealing with children and ensure the rehabilitation measures and immediate psychological support and treatment for abused children.[61]

3. Administration of justice, including impunity, and the rule of law

35. CHRM stated that the procedure for appointment of judges did not ensure judicial independence. Furthermore, it noted that several administrative and institutional deficiencies, including insufficient funding and inadequate staffing of the judiciary affected negatively on the quality of justice.[62] CoE-ECRI noted with concern the reports referring to serious problems in the functioning and independence of the judicial system.[63]

36. CHRM referred to the high percentage of reported complaints received by the Ombudspersons regarding the failure to guarantee a fair trial. It indicated that the main issues were the failure to examine cases within a reasonable time, limited access to a qualified lawyer, non-enforcement of court's decisions and the violation of procedural rules by courts.[64] JS3 recommended that the Government adopt measures prohibiting court practices for scheduling numerous cases at the same time and adopt the law ensuring the possibility to appeal against the excessive delays.[65]

37. AI mentioned that, in practice, the right to a public hearing was often restricted for reasons falling outside the legally permitted restrictions, including the lack of suitable court buildings.[66] AI recommended that the Government ensure that court hearings were public and that information about the dates and times of such hearings was publicly available.[67]

38. CHRM stated that there was no separate system of juvenile justice.[68] JS1 reported about excessive pre-trial detention of juveniles, inhuman conditions in the pre-trial detention facilities.[69] Furthermore, JS3 noted the lack of facilities in police stations to detain juveniles separately from adults. JS3 recommended that the Government establish separate panel or specialisation of judges for juveniles, create conditions for keeping arrested juveniles separate from adults; reduce the usage of pre-trial arrest for children and prohibit the use of isolation cells as a disciplinary measure for juveniles.[70]

39. JS3 reported about the lack of effective investigations of and punishment for acts of torture by police in the aftermath of the elections in April 2009.[71] HRIC/CIDO made similar observations.[72] In this respect, AI reported that most of the trials had been still ongoing and there was a conviction in one case only.[73]

40. AI stated that the failure to carry out effective and impartial investigations into torture allegations maintained a climate of impunity.[74] AI recommended that the Government investigate all allegations of torture and other ill-treatment; bring anyone identified as responsible to justice; suspend any police officer or law enforcement official who was under investigation for having committed acts of torture and ensure that all the victims received reparations.[75]

41. JS3 reported about the lack of investigations into allegations for abuse and harassment of LGBT persons by the law enforcement officers, resulting in total impunity and the lack of remedy for victims.[76] Furthermore, AI noted the unwillingness demonstrated by the authorities to protect sexual, religious and ethnic minorities from attacks by various groups in society.[77]

4. Right to privacy, marriage and family life

42. IDOM, JS2 and JS3 reported about the illegal disclosure by doctors to third parties of the data regarding the patients' HIV status.[78]

43. IDOM noted that sharing the personal information regarding drug users between the medical staff and the state institutions constituted an unjustified interference in the private life.[79]

44. IDOM, JS2 and JS3 reported that the mandatory medical examination, including testing for HIV/AIDS, was a precondition for presenting application for marriage and that the Bureau of Migration and Asylum refused to issue immigration certificates to foreign citizens with HIV/AIDS who were married to the Moldovan citizens.[80]

45. IDOM and JS2 added that there was a medical contraindication for persons with HIV/AIDS to adopt children and that children with HIV/AIDS were impeded to be adopted.[81]

46. JS1 noted that in recent years, poverty, unemployment and low salaries on existing job places forced people to abandon their children and leave to different countries to work mainly illegally. It explained that these children were placed in the institutional care and they had no chance to receive adequate education and had low adaptability after leaving residential institutions, thus being highly exposed to the risk of human trafficking.[82]

47. GENDERDOC-M stated that there was no mechanism on changing identification documents for transgender individuals.[83] CHRM and JS2 made similar observations.[84]

48. CoE-ACFC referred to reported cases of non-registration of Roma children at birth resulting in the lack of identity documents.[85]

5. Freedom of religion or belief, expression, association and peaceful assembly and right to participate in public and political life

49. JS4 and HRIC/CIDO referred to the violation of the Constitutional principle of separation of the state from the church in practice.[86] HRIC/CIDO urged the Government to take steps to comply with the Constitution to ensure the separation of religion from the state.[87]

50. CHRM stated that the issue of the registration of the Muslim religious community had not been solved.[88] The Committee of Ministers of the Council of Europe (CoE-CM) and CoE-ASFC made similar observations.[89] TEAJCW stated that local officials obstructed the efforts of Jehovah's Witnesses to register as a legal entity or to obtain, build, renovate, or use their houses of worship.[90] CoE-CM recommended that the Government ensure that Muslim believers and persons belonging to other religions could effectively enjoy the right to manifest their religion or belief and establish religious institutions, organizations and associations.[91]

51. Conscience and Peace Tax International (CPTI) noted the positive development of shortening of the alternative service to 12 months, which became equal to the duration of the military service. However, it remained concerned that the recognition of conscientious objectors was apparently confined to members of specific groups.[92]

52. CoE-ACFC referred to the reported lack of pluralism and excessive restrictions on the freedom of the media.[93] CoE-Commissioner referred to reported restrictions of the freedom of the media in the context of the post-electoral demonstrations and arrests, including the assault and detention of local and foreign journalists and restrictions upon access to internet services or websites.[94]

53. JS3 reported on the political dependence of the Broadcasting Coordinating Council as well as the corruption of its members.[95]

54. GENDERDOC-M reported that the organisations working on LGBT persons' had never received an authorization to hold a peaceful demonstration. Furthermore, it stated that LGBT community representatives, in 2008, were attacked when they were trying to hold a

peaceful demonstration and that police did not intervene to protect protestors.[96] JS2, JS3 and HRIC/CIDO made similar observations.[97] AI recommended that the Government ensure that the failure by the police to protect peaceful protestors is investigated.[98]

55. HRIC/CIDO stated that the registration of a number of public organisations and religious groups was unduly delayed. It urged the Government to discontinue the practice of unjustified delays in the process of registration of public associations and unjustified refusal to register.[99]

56. CoE-ACFC noted with regret that the 2007 Law on Political Parties prohibited the creation of political parties on the basis of ethnic or national origin and expressed concern that the Law restricted the scope for persons belonging to minorities to set up political parties representing their legitimate interests.[100]

57. HRIC/CIDO and JS2 noted the low representation of women in the government.[101] JS2 recommended that the Government ensure the compliance with its obligations in the framework of Millennium Development Goals to guarantee 25-40 percent representation of women in public administration by 2015.[102]

6. Right to work and to just and favourable conditions of work

58. HRIC/CIDO referred to the numerous cases of discrimination in employment based on gender, language, age, ethnicity and sexual orientation.[103] JS2 stated that women were discriminated based on the matrimonial status, age and presumptions regarding the time that is necessary to dedicate to family life.[104] JS2 pointed out the practice of mandatory HIV/AIDS medical testing for the employment.. It recommended that the Government ensure equal opportunities in employment to persons living with HIV/AIDS.[105] JS3 reported on the pressure made by employers to resign once the sexual orientation of an employee was revealed.[106]

59. CNR stated that the Roma's access to labor market was infringed by employers who usually avoided or directly refused to employ them because of existing prejudices and stereotypes towards the Roma. It added that the long-term unemployment had negative effects on the social fabric of the Roma community.[107] CoE-ECRI encouraged the Government to continue to assist members of Roma communities in obtaining employment and to prohibit any discriminatory conduct by employers who refuse to take on the Roma on the grounds of their ethnic origin.[108]

60. JS2 noted that employment was almost unattainable for most people with disabilities. The legislation requiring employers to reserve at least 5 percent of work places for persons with disabilities had not been enforced.[109] Furthemore, CLAPD stated that there was no coherent social policy on inclusion of persons with disabilities into the workforce.[110]

7. Right to social security and to an adequate standard of living

61. HelpAge indicated that the level of pensions was inadequate and below the subsistence income.[111] Furthermore, the combined effects of migration and economic transition had undermined traditional social and family structures where older people found themselves in the role of careers of grandchildren left in their care and had to mostly rely on their pensions to support the family.[112] HelpAge and JS2 recommended that the Government increase the value of the existing contributory pensions and consider wider policy options for non-contributory social security schemes and namely the feasiblity of a universal non-contributory pensions.[113]

62. HelpAge pointed out that the large numbers of people working in the informal sector or as unregistered workers would lack the access to social security when they reached retirement age.[114] HelpAge highlighted that the lack of bilateral agreements prevented the

portability of social insurance even if anindividual had been a “regular” migrant and had contributed to the system in the country of migration.[115] It recommended that the Government ensure that the individuals working in the informal sector, including migrant workers, have access to social security when they reach the retirment age.[116]

63. CLAPD stated that pensions and social protection were insufficient for persons with disabilities.[117] JS1 noted that social services did not reach to all children with disabilities and their families in need.[118]

64. JS2 mentioned that the right to the healthcare of LGBT persons was constantly infringed owing to obsolete medical education of the doctors on matters of sexual orientation and identity and that LGBT persons refrained to visit doctors with the fear that they would be directed to psycologists and psychiattrists to undergo treatment of ¨homosexual pathology and deviation¨.[119] JS3 made similar observations.[120]

65. While expressing concern at the situation regarding treatment of and attitude towards children with convulsive syndrome, ASCCS recommended that the Government, inter alia, exclude epilepsy from the classification of mental diseases and severe medication treatment for children with autism.[121]

66. CNR underlined that the poor health of the Roma was a consequence of unequal treatment of the Roma by the doctors, medical negligence, high costs of medical services, health insurance and medication.[122] Furthermore, JS3 referred to the overt refusal of medical personnel to provide medical services, including emergency to the Roma.[123] CNR made similar observations.[124] JS3 recommended that the Government guarantee the access to emergency medical assistance for the Roma, inluding in rural areas.[125]

67. CNR also indicated that because of unemployment, Roma could not obtain the health insurance for free when they reached the age of retirement. It recommended that the Government facilitate access to the health insurance for the Roma who are in a vulnerable position and do not fulfill the requirements to obtain free medical insurance.[126]

68. HelpAge and JS2 reported that age discrimination, high costs of medicine, informal fees and inadequate income were major barriers to older people’s enjoyment of the right to health.[127]

69. CNR referred to the poor living conditions of the Roma families caused by small size of dwelings and absence of utilities. It also underlined that the Roma who did not have registered residence had difficulties in requesting their housing rights and that the responsible authorities failed to ensure the provision of dwellings even to the registered representatives of the Roma.[128] JS3 reported about the failure to allocate land for housing to the Roma by local authorities even when they were included in the list of the land allocations.[129] CNR recommended that the Government develop and implement policies and projects aimed at improving the Roma housing conditions and involve the Roma communities and associations as partners in housing project construction, rehabilitation and maintenance.[130]

8. Right to education

70. JS1 stated that although the primary and secondary education were free of charge, the practice of informal payments was widespread in the education system. As a result, the children from poor families were prone to drop-out and to be subjected to discrimination.[131]

71. JS1 reported that the enrolment rate had constantly decreased during the last years mostly in the rural areas.[132] Furthermore, JS1 stated that the rural schools were ill-equipped and understaffed to meet the existing educational standards.[133]

72. While noting the initiatives taken to improve the enrolment of Roma children at schools and their integration in the education system, CoE-ACFC was concerned that the main difficulties faced by the Roma in the education system persisted: lower enrolment in education, higher drop-out rates, much lower educational attainment and higher illiteracy rates among Roma compared to the majority population.[134]

73. Furthermore, CNR claimed that unequal teatement by teachers who tended to give less attention to Roma children in the classrom and the discriminatory attitude towards Roma students discouraged them from attending school and became one of the reasons for school drop-outs among the Roma. It added that the problem of early marriages among the Roma communities was another reason that negatively affected education of children, which usually led to school drop-out, especially of Roma girls.[135]

74. According to CNR, Roma faced difficulties in accessing higher education, because they were the last ones on the list of quota for disadvantaged groups.[136] JS3 made similar observations.[137] CNR recommended that the Government support the inclusion in the school system of all children of Roma origin and reduce drop-out rates, especially among Roma girls, in cooperation with Roma parents, associations and local communities.[138]

75. JS1 reported that children with disabilities were generally studied in segregated educational settings, which offered reduced opportunities for the rehabilitation of these children. The access of these children to mainstream education was limited by the lack of comprehensive policies on inclusive education and the practical mechanisms for their integration in mainstream educational institutions.[139] JS1 and JS3 recommended that the Government adopt the concept of Inclusive Education.[140]

9. Minorities

76. HRIC/CIDO indicated that the rights of minorities had been systematically violated and that people belonging to minority groups faced difficulties related to employment, education, access to health care, expression of opinion, freedom of assembly and association.[141]

77. CNR mentioned that the Roma that represented one of the largest ethnic minorities was twice more dependant of the state social assistance than the majority of the population owing to their low level of education and the high rate of unemployment. It referred to the lack of targeted programs and measures that could improve the situation of the Roma.[142]

78. JS3 stated that the Roma were the most vulnerable and politically under-represented ethnic group and that they faced the high risk of being marginalised by the authorities and non-state actors.[143]

79. CoE-ACFC was concerned by the fact that the level of participation of persons belonging to minorities in all fields of the State administration and public services remained low. Insufficient command of the State language among national minorities often constituted a barrier in accessing public employment.[144] Furthermore, CoE-ACFC was concerned by the fact that the Roma were rarely represented in elected bodies, which was also the case for persons belonging to numerically smaller minorities.[145]

80. CoE-ACFC refered to the claims of representatives of some national minorities that the possibilities to use minority languages other than Russian in relations with the adminstrative authorities remained limited. It encouraged the Government to promote the use of minority languages in relations with the local adminstrative authorities.[146]

81. CoE-CM stated that the public TV and radio had continued to broadcast programmes in minority languages. However, the amount and quality were reportedly insufficient and broadcasting time, as far as television was concerned, were not adequate.[147]

82. HRIC/CIDO reported that children, whose native language was other than Russian or State language, were forced to learn in a foreign language, which had an effect both on the quality of education and on the preservation of their ethno-cultural and linguistic identity.[148] CoE-CM stated that further developments of the system of teaching of and in minoritiy langagues were hampered by a general lack of means, notably textbooks and adequate teacher training.[149]

83. According to CoE-ACFC, despite the existence of the specific autonomy status granted to Gagauzia, more resolute efforts need to be made to preserve and develop the Gagauz language and cultural heritage.[150]

10. Migrants, refugees and asylum-seekers

84. HelpAge mentioned the high rate of migration that started in late 1990s and rapidly accelerated to unprecendented levels.[151] IOM indicated that many migrants found themselves in precarious situations in countries of destination and at risk of being exposed to human rights violations and explained that the Republic of Moldova was seeking to improve its outreach and assistance capacity towards Moldovans abroad.[152] In this respect, JS1 recommended that the Government seek agreements with relevant host countries to facilitate the reunification of children with their migrant parents and create social reintegration programs for parents returning from abroad.[153]

85. IOM noted the detention of children in the Migrants' Accommodation Center (MAC) and stated that special norms should be established to refrain the detention of minors.[154]

86. IOM stated that the smuggled migrants were criminally charged for illegal crossing of a border as any other illegal migrants because the Republic of Moldova did not amend its legislation to bring it in line with international law.[155]

87. IOM pointed out the need for better research and documentation of the number of stateless persons and factors giving rise to statelessness; racial discrimination and other forms of negative treatment of dark-skinned migrants and of the treatment of irregular migrants in the Republic of Moldova.[156]

11. Situation in or in relation to specific regions or territories

88. CHRM mentioned that the Republic of Moldova did not exercise effective control over Transnistria region, a fact which prevented the promotion and protection of human rights in the region.[157] CoE-ACFC made similar observations.[158]

89. IOM underlined that Transnistria region remained a significant source and transit area for trafficking in persons.[159] AI expressed concern about violations of the right to a fair trial in Transnistria region in 2010.[160] JS3 reported about the control over the activities of the mass media by administration of the region supported by business circles and the intimidation against journalists in Transnistria region.[161]

III. Achievements, best practices, challenges and constraints

N/A

IV. Key national priorities, initiatives and commitments

N/A

V. Capacity-building and technical assistance

N/A

Notes

[1] The stakeholders listed below have contributed information for this summary; the full texts of all original submissions are available at: www.ohchr.org. (One asterisk denotes a non-governmental organization in consultative status with the Economic and Social Council. Two asterisks denote a national human rights institution with "B" status.)

Civil society

AI	Amnesty International, London, United Kingdom*
ASCCS	Association for the Support of Children with Convulsive Syndrome, Republic of Moldova
CLAPD	Center for Legal Assistance for Persons with Disabilities, Republic of Moldova
CNR	Roma National Centre, Chisinau, Republic of Moldova
CPTI	Conscience and Peace Tax International, Leuven, Belgium*
ERT	Equal Rights Trust, London, United Kingdom
GENDERDOC-M	Information Centre GENDERDOC-M, Chisinau, Republic of Moldova
HelpAge	HelpAge International, London, United Kingdom*
HRIC/CIDO	Human Rights Information Center, Republic of Moldova
IDOM	Moldova Institute for Human Rights, Chisinau, Republic of Moldova
JS1	Joint Submission No 1: Alliance of Active NGOs in Social Protection of the Child and Family (ASPCF) and Independent Experts: Tatiana Jalba, Elena Prohnitchi, Veaceslav Luca and Sergiu Rusanovschi, Chisinau, Republic of Moldova.
JS2	Joint Submission No 2: Coalition on Anti-Discrimination: National Youth Council in Moldova, CNTM; Informational Center "GenderDoc-M"; Roma National Center in Moldova, CNR; Resource Center for Human Rights, CReDO; Association of Roma people "Porojan", Association "Young and Free"; Hyde Park civic initiative group; Center of Partnership for Development,CPD; Human Rights Institute, IDOM; National Center for Durable Development, CNDD; HomoDiversus association – observer member; "The Stoics" association for youth with functional disabilities; "Sprijin si Speranta" Association for support of persons with disabilities. The Association for Charity and Social Assistance "ACASA"; Center for Partnership and Development, CPD and HelpAge Moldova
JS3	Human Resource Group: 13 human rights activists
JS4	HomoDiversus; Human Rights Information Centre (CIDO) and the Association of Social and Cultural Development ("Delfin"), Chisinau, Republic of Moldova
TEAJCW	The European Association of Jehovah's Christian Witnesses, London, United Kingdom.

National human rights institution

CHRM	Center for Human Rights of Moldova, Chisinau, Republic of Moldova**

Regional /international organizations

CoE	Council of Europe, Brussels, Belgium • CoE-ACFC: Advisory Committee on the Framework Convention for the Protection National Minorities. Third Opinion on Moldova

adopted on 26 June 2009. ACFC/OP/III(2009)003. 11 December 2009;

- CoE-Commissioner: Commissioner for Human Rights. Report by Thomas Hammarberg, Commissioner for Human Rights of the Council of Europe Following his visit to Moldova 25 to 28 April 2009, CommDH(2009)27, 17 July 2009;
- CoE-CPT: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment, Report to the Moldovan Government on the Visit to Moldova Carried out by the CPT from 27 to 31 July 2009, CPT/Inf(2009)37, 14 December 2009;
- CoE-CPT: European Committee for the Prevention of Torture and Inhuman or Degrading Treatment of Punishment, Rapport au Gouvernement de la République de Moldavie relatif à la visite effectuée en Moldavie par le Comité européen pour la prevention de la torture et des peines ou traitements inhumains ou dégradants (CPT) du 14 au 24 septembre 2007, CPT/Inf(2008)39, 4 décembre 2008 ;
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[6] JS2, para. 11, p. 10 and HRIC/CIDO para. 4.
[7] CRN, p. 5.
[8] HRIC/CIDO, para. 7; ERT, para. 16 (i), CoE-CoM, para. 2, p. 2, CoE-ACFC, para. 46 and JS2, para. 11, JS3, p. 3.
[9] CHRM, p. 1.
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[13] JS3, p. 6.
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[16] CoE-CoM, para. 1 (b), p. 2.
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[20] IOM, para. 6, p. 2.
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[23] JS2, para. 7, p. 6.
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[25] CoE-CoM, para. 1 (b), p. 2.
[26] CoE-ACFC, para. 84.
[27] GENDERDOC-M, para. 4.
[28] JS2, para. 10, p. 9.
[29] CoE-ACFC, para. 86, see also CoE-CM, para. 2.
[30] GENDERDOC-M, para. 1, p. 1.
[31] JS4, paras. 9–11, pp. 1–2.
[32] CNR, pp. 1–2.
[33] CoE-ECRI, para. 77, p. 22.
[34] CLAPD, p. 1.
[35] ASCCS, p. 1.
[36] AI, para. C, p. 1.
[37] JS3, p. 6.
[38] AI, p. 2.
[39] CoE-Commissioner, para. 39, see also CPT, paras. 12–14.
[40] AI, p. 2.
[41] CoE- Commissioner, p. 3. See also CoE-CPT, para. 16.
[42] JS3, p. 6.
[43] JS3, pp. 3–4.
[44] GENDERDOC-M, paras. 5–6.
[45] TEAJCW, pp. 1–2.
[46] IDOM, para. IV, pp. 4–5.
[47] IDOM, para. IV, p. 5.
[48] ASCCS, pp. 2–3.
[49] CHRM, para. 13.
[50] ERT, paras. 8, 9, 12 and 16 (V), see also IOM, para. 7 and JS3, p. 5.
[51] JS3, pp. 4–5.
[52] IOM, para. 7, p. 2, see also ERT, para. 16 (v) and JS3, p. 5.
[53] IOM, para. 8, p. 2.
[54] IOM, para. 11, p. 3.
[55] JS3, p. 5.
[56] IOM, para. 8, p. 2.
[57] JS1, para. 27, p. 7.
[58] JS1, para. 32, p. 8.
[59] JS1, para. 34, p. 9.
[60] CNR, p. 3.
[61] JS1, paras. 29 and 31, p. 8.
[62] CHRM, paras. 2–4.
[63] CoE-ECRI, para. 27, p. 11.
[64] CHRM, para. 2.
[65] JS3, p. 7.
[66] AI, para. C, p. 3.
[67] AI, para. D, p. 5.
[68] CHRM, para. 34.

[69] JS1, para. 39, p. 9.
[70] JS3, p. 9.
[71] JS3, p. 6.
[72] HRIC, para. 31, p. 5. See also IDOM, para. III, p. 4.
[73] AI, p. 3.
[74] AI, para. C, p. 1.
[75] AI, para. D, p. 5.
[76] JS3, p. 2.
[77] AI, para. C, p. 4.
[78] IDOM, para. I, p. 2, JS2, para. 4, p. 2, JS3, p. 1.
[79] IDOM, para. II, p. 3.
[80] IDOM, para. I, p. 2, JS2, 4, p. 2 and JS3, p. 1.
[81] IDOM, para. I, p. 2, and JS2, para. 4, p. 2, see also JS3, p. 1.
[82] JS1, para. 2, p. 1.
[83] GENDERDOC-M, para. 8, p. 5.
[84] CHRM, para. 11 and JS2, para. 5, p. 3.
[85] CoE-ACFC, para. 50.
[86] JS4, paras. 15–16, p. 2 and HRIC/CIDO paras. 17–18.
[87] HRIC/CIDO, para. 24, p. 4.
[88] CHRM, para. 9.
[89] CoE-CM, para. 1 (b) and CoE-ACFC, para. 24.
[90] TEAJCW, p. 1.
[91] CoE-CM, para. 2, see also CoE-ECRI, para. 74, p. 21.
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[93] CoE-ACFC, para. 83.
[94] CoE-Commissioner, para. 31.
[95] JS3, p. 8.
[96] GENDERDOC-M, para. 3, p. 2.
[97] JS2, para. 5, p. 3, JS3, p. 2 and HRIC/CIDO, para. 27, p. 4.
[98] AI, para. D, p. 5.
[99] HRIC/CIDO, paras. 29–30, p. 4, see also JS2, para. 5, p. 4 and CoE-ECRI, para. 69.
[100] CoE-ACFC, paras. 96–97.
[101] HRIC/CIDO, para. 14, p. 3 and JS2, para. 7, p. 5.
[102] JS2, para. 7, p. 6, see also HRIC/CIDO, para. 14, p. 3.
[103] HRIC/CIDO, para. 11, p. 2.
[104] JS2, para. 7, p. 6.
[105] JS2, para. 4, p. 2. See also IDOM, p. 3 and JS3, p. 2.
[106] JS3, p. 3.
[107] CNR, p. 3.
[108] CoE-ECRI, para. 65, p. 19.
[109] JS2, para. 9, p. 8.
[110] CLAPD, p. 2.
[111] HelpAge, para. 7, p. 2.
[112] HelpAge, para. 17, p. 4.
[113] HelpAge, paras. 24–25, p. 5 and JS2, para. 8, p. 7.
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[115] HelpAge, para. 13, p. 3.
[116] HelpAge, para. 25, p. 5.
[117] CLAPD, p. 2.
[118] JS1, para. 20, p. 5.
[119] JS2, para. 5, p. 3.
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[122] CNR, p. 4.
[123] JS3, p. 3.
[124] CNR, p. 4.

[125] JS3, p. 4.
[126] CNR, p. 4.
[127] HelpAge, para. 23, p. 5 and JS2, para. 8, p. 7.
[128] CNR, p. 3.
[129] JS3, p. 4.
[130] CNR, p. 5.
[131] JS1, p. 6. See also JS3, p. 10.
[132] JS1, para. 4, p. 2.
[133] JS1, para. 25, p. 6.
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[135] CNR, p. 4.
[136] CNR, p. 5.
[137] JS3, p. 3.
[138] CNR, p. 5.
[139] JS1, para. 21, p. 5.
[140] JS1, para. 21, p. 5 and JS3, p. 10.
[141] HRIC/CIDO, para. 6, p. 1.
[142] CNR, pp. 1 and 4.
[143] JS3, p. 3.
[144] CoE-ACFC, para. 169, see also CoE-CM, para. 1 (b), p. 2.
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[147] CoE-CM, para. 1 (a), p. 1.
[148] HRIC/CIDO, paras. 8–9, p. 2.
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[150] CoE-ACFC, p. 2.
[151] HelpAge, p. 13.
[152] IOM, paras. 20–22, p. 5.
[153] JS1, p. 3.
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[155] IOM, para. 13, pp. 3–4.
[156] IOM, para. 14, p. 4.
[157] CHRM, para. 1.
[158] CoE-ACFC, para. 10, p. 5.
[159] IOM, para. 8, p. 2.
[160] AI, para. C, p. 4.
[161] JS3, p. 8.