#### UNIVERSAL PERIODIC REVIEW OF THE UN HUMAN RIGHTS COUNCIL - REPUBLIC OF MOLDOVA -INFORMATION SUBMITTED BY MOLDOVAN CIVIL SOCIETY ORGANIZATION

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#### Acronyms:

- NGO: Non-governmental organization
- WEOG: Western European and Others Group
- EEG: Eastern Europe Group
- CRPD: Convention on the Rights of Persons with Disabilities
- EU: European Union
- OEI: Organización de Estados Iberoamericanos

## PART 1 – Introduction

- (1) This submission was developed by the Public Association Speranta si Sanatate (NGO Hope and Health)<sup>1</sup>, which has been active since 2001 and implements social programmes designed to integrate adults with intellectual und psychosocial disabilities into society, including through raising awareness and empowering their parents. It relies on funding and support from a number of international foundations to carry out its work.
- (2) Hope and Health have supported more than 400 families in the last fifteen years providing different kinds of long-term support: informational, psychological, therapeutical, material, employment/occupational, legal assistance, etc.

## PART 2 – Executive summary and methodology

- (3) With this document, Hope and Health aims to bring its contribution to the review process of Moldova regarding the rights of the most vulnerable, particularly adults with intellectual disabilities and their families. The mentioned target group is continuously involved in Hope and Health work and advocacy efforts, thus collected data can be used to develop solutions to many challenges.
- (4) The situation of people with intellectual disabilities has been analysed through three main topics on human rights, which are interdependent with other topics: A) RIGHT TO HOUSING, B) RIGHT TO HEALTH, C) RIGHT TO WORK. For each of the topics, the organization presents its growing concerns and identifies alternatives for ensuring the respective human rights and freedoms.

## PART 3 – Legal framework

- (5) The Moldovan Constitution, adopted in 1994, contains detailed provisions on political, civil, economic, social and cultural rights.
- (6) The Republic of Moldova has affirmed its commitment to the promotion and protection of human rights through ratifying seven major international human rights treaties, as well as several Optional Protocols. The Republic of Moldova's 2010 ratification of the Convention on the Rights of Persons with Disabilities has provided an important potential reform context in a number of areas.

<sup>&</sup>lt;sup>1</sup> http://hopeandhealth.md/about

- (7) The Republic of Moldova has adopted important legislation including the 2012 Law on Ensuring Equality, the 2008 Law on Preventing and Combating Family Violence, and the 2012 Law on the Social Inclusion of Persons with Disabilities.
- (8) The Republic of Moldova has a robust legal framework for combating poverty and promoting human rights, but there are severe implementation gaps in almost all social policies. Laws and policies lack systematic implementation and accountability mechanisms<sup>2</sup>.
- (9) The law prohibits discrimination against persons with physical, sensory, intellectual, and mental disabilities in employment, education, access to public facilities, health care or the provision of other government services, but the law is rarely enforced.

# PART 4 – Recommendations received by Moldova at the UN Universal Periodic Review 22

- (10) The recommendations made for Republic of Moldova regarding issues concerned are:
- (11)Implement the Law on Social Protection of Disabled Persons as well as international obligations that Moldova has agreed regarding people who are disabled (made by Norway WEOG);
- (12)Develop, in compliance with CRPD, a legal framework that ensures an environment without barriers or obstacles, and includes access to goods and services (made by Spain, WEOG, EU, OEI);
- (13)Continue pursuing awareness raising campaigns aimed at eliminating stigmatization of persons with disabilities, the difficulties they face at the labor market and in general, their exclusion from social life (made by Slovakia, EEG).

## PART 5 – Human rights implementation in Moldova

#### Background

- (14)People with intellectual and psychosocial disabilities are among the most marginalized groups in developing countries. Even though development actors have pledged to focus their work on the most vulnerable in a community, many programmes continue to ignore and exclude this vulnerable group.<sup>3</sup>
- (15) In Moldova there are approximately 183,700 persons with disabilities registered, (more than 5% of total population) including more than 25,000 persons with severe disabilities.<sup>4</sup>
- (16) The main registered disabilities are intellectual and behavioural disorders (4.2 cases per 1,000 children), nervous system diseases (4.0 per 1000 children), congenital malformations and chromosomal abnormalities (5.8 cases per 1,000 children), which means 1.5% of the population.<sup>5</sup>
- (17) There is no disaggregated official data on adults with intellectual and psychosocial disabilities in Moldova, but statistics affirm that, 18% of all persons with disabilities are people with neurological problems, which mean 33,066 persons. Beneficiaries of specialized social services in 2013 = 2,703 including children, old people and disabled. 1,827 people with disabilities have received highly specialized services including the 6 residential institutions for adults with disabilities.
- (18)Considering the above data, we can estimate that up to 30,000 people with intellectual and psychosocial disabilities lack any specialized support measures. Experience shows that this figure is much higher.
- (19) As, the Republic of Moldova continues to rank at lower levels on the global Human Development Index, placed 113th out of 187 countries in 2012, there is a big discrepancy between the rich and the poor. People living in poverty face severe hardship, at a time when the costs of essential goods

vulnerable group - launched on 16 SEPTEMBER 2010 | NEW YORK | GENEVA at the United Nations

<sup>&</sup>lt;sup>2</sup>Report of the Special Rapporteur on extreme poverty and human rights, Magdalena Sepúlveda Carmona

<sup>&</sup>lt;sup>3</sup> World Health Organization (WHO) report on mental health and development - Targeting people with mental health conditions as a

<sup>&</sup>lt;sup>4</sup> National Bureau of Statistics of the Republic of Moldova

 $<sup>^5</sup>$  Statistics on disabled people in Moldova and worldwide - http://www.civic.md/stiri/blog-vox/21545-statistici-privind-persoanele-cu-dizabilitati-din-republica-moldova-si-din-intreaga-lume.html#sthash.IEbx1uTi.dpuf

and services have risen steadily. Moldovans struggle to enjoy economic, social and cultural rights such as the right to adequate nutrition, education and health. Certain groups are disproportionately more likely to live in poverty, including persons with disabilities, many of whom often face discrimination, social exclusion, poverty, unemployment, and lack of access to public services.

(20) In Moldova, social protection of persons with disabilities is ensured through the system of social security (pensions) and social benefits, as well as various social services. Depending on the degree of disability, a monthly pension ranges from 525.7 lei (\$26) to 1,041.2 lei (\$52) for persons with severe disabilities, when, according to the latest statistics, in the first half of 2014, the subsistence minimum amounted to 1,668 lei (\$83)<sup>4</sup>.

#### A) RIGHT TO HOUSING and freedom from poverty

- (21)Considering Hope and Health and its members (parents of adults with intellectual disabilities) experience, people with intellectual and psychosocial disabilities usually remain with their parents (mostly single mothers) on finishing school, which makes it difficult for the parents to find regular employment. Social protection does not cover the family's expenses and no or lack social assistance programs for them. In this way, up to 80% of our beneficiaries are subject to high poverty levels and little or no necessary assistance. By law, adults with intellectual disabilities need personal assistant, which is usually the mother who received 60 lei (\$3) per month. As parents get older, it becomes increasingly difficult for them to perform these tasks. As a result, up to 20% of adults with disabilities are placed in residential institutions when parents can no longer manage, as they are only place in which people with disabilities can receive necessary assistance (shelter, food, medical care, socialization, etc.).
- (22) The only existing way of social protection for people with intellectual disabilities are the boarding schools and residential institutions where the services of specialists are available. The process of deinstitutionalization removes even this minimal support for those few beneficiaries who have access to these services. There is a particular need to introduce a flexible pathway of community-based, user-oriented services. However, overly critical reporting of the situation has the potential to damage the work of those institutions, which are already active in the field of mental healthcare.
- (23) People with intellectual disabilities who are living with their family members tend to live independently when they grow up, but many of them cannot take care of themselves as they need treatment and may endanger their lives or those of others; parents age or cannot afford to take proper care of their adult offspring. Usually, these families live in very small apartments and very bad conditions.
- (24) Considering the economic situation in Moldova, many other vulnerable groups beside people with disabilities need housing solutions. With State support and community involvement, solutions can be found. Many NGOs working on the ground have efficient solutions, but communication between Civil Society Organizations and Governmental institutions need to be improved.

#### **B) RIGHT TO HEALTH**

- (25) People with intellectual disabilities need a tailored medical approach depending on their diagnosis, severity of impairment, level of development, etc.: individual treatment, relaxation procedure, occupational therapies, and communication. Many of the parents/caregivers even are not aware of the benefits they are entitled to from the State (free medicines, social assistance programs, exemptions, incentives, etc.).
- (26) Due to economic situation and poverty in Moldova a growing trend of people who have psychoneurological crises because of depression (no jobs, housing, poverty) may be observed. Particularly, these people need rehabilitation services (on temporary basis) to recover (few hours per day). These services were provided free in specialized day care at the Psychiatric Hospital. After the closure of the day care, the State did not create alternative services. Some private clinics provide assistance but few people can afford them.
- (27) In the period 2010-2015, the State took numerous measures to ensure the deinstitutionalization of people with disabilities. Only a small percent of people with disabilities are placed in institutions

as most live at home, isolated from society due to lack of necessary medicines, therapies and socialization programs. Without alternatives to the old institutions, former patients may end up homeless, on the streets, without treatment or food.

(28) Due to help of international grants, approved mechanisms and instruments of community services for mental health, models of organization and funding for medical and social services have been developed through Mental Health Centers. Mental Health Centers are responsible for coordinating and methodological training of specialists, treatment, rehabilitation and information of people with mental health problems. So far, only four Mental Health Centers have been opened. At the same time, many of the services are already provided by NGOs, who employ experts and specialists. With State support and an effective coordination Strategy between State bodies and NGOs, much more is possible.

#### C) RIGHT TO WORK

- (29) People with intellectual and psychosocial disabilities remain stigmatized by society, resulting in a high rate of unemployment and isolation. Although the law provides for equal employment opportunities and prohibits discrimination against persons with disabilities, many employers either fail to comply or avoid employing such persons.
- (30) The law requires that 5 percent of the workforce in companies with 20 or more employees be persons with disabilities. Such individuals are legally entitled to two months of paid annual leave and a six-hour workday, benefits that make employers less willing to hire them.
- (31)Some protected jobs are offered by few NGOs, but without legal measures and State involvement, very few beneficiaries can benefit.

# **PART 6** – Alternatives to improve the situation (Recommendations to Moldovan Government)

- (32) To develop a new strategy for social inclusion of people with disabilities including an implementation and monitoring mechanism involving CSOs;
- (33) To streamline the social protection system for people with intellectual disabilities and their families by creating interdisciplinary committees on mental health at a local level in order to facilitate the cooperation of various disciplines (family doctor, psychiatrist, social worker, representatives of NGOs, other specialists);
- (34) To adopt an inclusive approach towards people with intellectual disabilities and include them in all development initiatives, scaling up services for mental health in primary care;
- (35) To elaborate a plan on habitats with a component dedicated to the most disadvantaged people (pro-poor-policies); and to disseminate clear public information on the conditions for having access to housing programs in order to start reverting the social inequalities in Moldova;
- (36) To ensure access by persons with intellectual disabilities to public housing programs;
- (37) To develop and implement a mechanism of encouraging local businesses to participate in national social housing program and other initiatives for social protection;
- (38) To improve social services for people with intellectual and psychosocial disabilities, in particular by improving existing ones and by creation of alternatives;- to reinforce existing specialized services, as well as to support community based organizations and NGOs, so that the family can choose the best option for them; All these positions are not mutually exclusive, but rather complementary;
- (39) To raise investment in health, taking into account the community needs in health services delivery; in particular, to provide each person with intellectual disabilities the necessary psychotropic medications and anticonvulsants, psychiatric, palliative services, etc. and reopen day care centers for people with intellectual disabilities affiliated to psychiatric hospitals;
- (40) To guarantee everyone accessibility to the information about their benefits (through the family doctor, social advertising, social workers, etc.);

- (41) To provide the necessary medicines and primary health services for persons with intellectual and psychosocial disabilities for free;
- (42) To create mechanisms that facilitate implementation and accountability of the law on the employment of people with disabilities, in particular the possibility of providing alternatives for companies (companies can buy products or services from disabled persons organization or NGO working with people with disabilities based on the Romanian model);
- (43) To develop and implement social educational programs for the community in order to raise awareness for the needs of people with intellectual disabilities.