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Road Map for Mainstreaming Ageing Republic of Moldova



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NOTE

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At the UNECE Secretariat Viviane Brunne, Alexandre Sidorenko and Andres Vikat worked on the first phase of the project and Vitalija Gaucaite Wittich and Fiona Willis-Núñez finalised this report, with assistance from Bogdan Andrei in 2011. UNECE is grateful for expert contributions received from Eppu Mikkonen-Jeanneret, Christopher T. Mallmann and Olga Poalelungi. Fiona Willis-Núñez edited the report and France Font-Vérot prepared the layout.

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UNECE Information Unit Palais des Nations CH-1211 Geneva 10 Switzerland	Phone: +41 (0)22 917 44 44 Fax: +41 (0)22 917 05 05 E-mail: info.ece@unece.org Website: http://www.unece.org
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The present volume is the second of UNECE's reports on country-level projects entitled Road Maps for Mainstreaming Ageing, undertaken in UNECE member States at the request of their Governments. These projects are an integral part of the programme of work of the UNECE's Working Group on Ageing.

The Road Maps provide a guide through which the country in question can uphold the commitments of the Madrid International Plan of Action on Ageing (MIPAA) and its Regional Implementation Strategy (RIS). A Road Map is intended to help identify concrete actions relevant to the economic, social, cultural and political specificities of the given country, to aid the country in fulfilling these internationally-agreed commitments within the framework of their own national situation.

The Republic of Moldova embarked upon this project by requesting to work with UNECE in November 2009, while at the same time developing the related National Strategic Programme on demographic security for 2011-2025. The present report reflects the outcomes of a wide-ranging participatory process that has taken place since then, in which close consultation with the Government of the Republic of Moldova has been coupled with the pursuit of a participatory approach so that the final product reflects the inputs of a variety of stakeholders from amongst all sectors of Moldovan society.

It is hoped that this report will prove useful as a guide to policymakers, civil society representatives and others working in support of older persons, both in the Republic of Moldova and beyond. The actions identified here are specific to the case of the Republic of Moldova—in which the demographic ageing produced by falling fertility and mortality rates is compounded by the effects of large-scale emigration, the continued impacts of the transition to a market economy, and more recently the global economic crisis. Nevertheless, lessons drawn from this Road Map may be useful throughout the region, and may encourage other countries to review and develop their national strategies on ageing in order to implement internationally-agreed commitments more effectively.

Sven Alkalaj
Executive Secretary
United Nations Economic Commission for Europe



You have time, I have only love... do not forget your elderly
Nataly Kanonik (©) - Andrey Rotary (design)

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LIST OF ABBREVIATIONS

CCA	Common Country Assessment
CIS	Commonwealth of Independent States
CPAP	Country Programme Action Plan
EFTA	European Free Trade Association
EU	European Union
EUROSTAT	Statistical Office of the European Union
GDP	Gross domestic product
HDI	Human Development Index
ICPD	International Conference on Population and Development
ILO	International Labour Organization
IMF	International Monetary Fund
IOM	International Organization for Migration
MDG	Millennium Development Goal
MLSPF	Ministry of Labour, Social Protection and Family
MIPAA	Madrid International Plan of Action on Ageing
NGO	Non-governmental organization
PPP	Purchasing power parity
RIS	Regional Implementation Strategy
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNECE	United Nations Economic Commission for Europe
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
WHO	World Health Organization

LIST OF EXPERTS

Mr. Christopher T. Mallmann	International consultant
Ms. Eppu Mikkonen-Jeanneret	International consultant
Ms. Olga Poalelungi	Local consultant

CURRENCY

The currency of the Republic of Moldova is the Leu (plural Lei), abbreviated to MDL. At the time of preparing the publication (September 2011) 1 Leu was equal to 0.0855 United States dollars (1 dollar equals 11.69 Lei).

This Road Map for Mainstreaming Ageing is the outcome of a project designed to help the Republic of Moldova translate the internationally-agreed policy agenda on ageing into a concrete way forward relevant to the country's own circumstances. It provides a number of recommendations and suggests actions for addressing ageing issues in the country.

Key findings of the Road Map

The principal theme running through the Road Map is that genuine progress in 'mainstreaming ageing' must look beyond the simplicity of numbers; numbers of persons in certain age groups, numbers entitled to and drawing pensions, numbers of working-age people migrating out of the country. A successful approach to ageing as conceptualized in the Madrid International Plan of Action (MIPAA) and its UNECE Regional Implementation Strategy (RIS) entails thinking about the needs, rights and contributions of older people in education, economic and social engagement, health and all other policy arenas. It also entails recognizing that ageing is a lifelong process so that health, educational and economic circumstances at all stages of life affect the eventual situation of older persons. The Republic of Moldova has taken great strides in recognizing the implications of population ageing and migration for the financial stability of the social welfare system, for example, and has invested significant effort in developing pension reforms and bilateral agreements around migration. Yet success will depend upon the country also addressing the subtler aspects of ageing related to housing, adult education or cultural participation, to give just a few examples.

To 'look beyond numbers' also means to go further than only enumerating facts, striving instead to monitor and evaluate their meaning. One of the key findings of the Road Map is that the Republic of Moldova has a well-advanced basis for the collection of statistics, but that this is not yet matched by an equally comprehensive framework for systematic monitoring and evaluation, integrated into policies from the outset. The Road Map therefore calls for both a strengthening of the institutional framework for policies relating to all of the MIPAA/RIS commitments and efforts to improve national capacities for designing, implementing and monitoring them.

Other recommendations of the Road Map

Improved integration of older persons in society requires measures to pro-actively facilitate their participation in social, cultural and political life, taking advantage of and promoting public, private and non-governmental initiatives as well as self-help networks and volunteers. Perceptions and images of ageing and older persons need to be monitored and, where necessary, challenged. The participation of all stakeholders in policymaking should be enhanced and safeguarded: the voices of all age groups should be heard in the formulation of policies that affect them, while the interests of the private sector, trade unions and civil society should also be considered.

Planned reforms of the social assistance system must be thoroughly enacted to ensure the equitability, clarity and sustainability of pensions and other benefits over the long term as the population of Moldova ages. National development plans, structural reforms and any future crisis management measures – as well as efforts to evaluate any of these – should specifically consider impacts on older persons within their assessments of effects on vulnerable groups.

In the labour market, explicit ageism is the most obvious but not necessarily the most insidious challenge. In addition, the Road Map calls for flexible working arrangements and adaptability of work environments to allow workers to remain in the labour force as long as they are willing and able to do so, enabling the economy to capitalize on their productivity while they benefit from the right to determine their own exit from the labour force. Provision of information and transparency are key factors here, as elsewhere.

Migration is of particular importance for Moldova, and is closely linked with the topic of ageing for a variety of reasons. Emigration of younger working-age people creates challenges for older persons and children remaining in the country, as well as for the social protection system that must safeguard them from poverty. Meanwhile the current and future coverage of both documented and undocumented migrants by social protection schemes abroad and in Moldova must be clearly defined so that pension accruals are recognized and honoured. Improvements in the registration of migrants, projection methods for estimating future migratory flows, and incentives for return migration are all called for.

The educational system must adjust to the inevitability of population ageing in a variety of ways; ensuring that teachers of all ages are recruited, well trained and fairly remunerated; raising awareness of age diversity amongst teachers and pupils; and fostering opportunities for learning beyond the formal school system, throughout the life course.

The health and well-being of older persons needs to be better assessed and protected, with a closer integration of health and social care and an increased level of attention to the specific needs of older persons in the training of medical personnel. Efforts at de-stigmatizing institutional care must be accompanied by recognition of the role of informal caregivers.

The Road Map recommends renewed attention to the housing conditions of older people, including considerations of accessibility, sanitation, energy supply and affordability, and suggests that standards be developed for new housing and for retrofitting existing housing.

Intergenerational solidarity is highlighted as a key element in successful mainstreaming of ageing. Fostering community-based interactions between generations, and monitoring perceptions of intergenerational justice, are suggested means of achieving such solidarity. Ensuring the proper recognition and social protection of informal carers of all ages, and especially of older people caring for the children of emigrants, will help to engender a sense of equity between generations.

The Road Map recognizes Moldova's significant capacities in data collection, but recommends additional focus on age-disaggregated data, regular reviews of household surveys for ageing-related content, and the building of capacities for analysis of collected data through the lens of MIPAA/RIS. Policy analysis for monitoring and evaluation is highlighted as a necessary step beyond the collection of data. Development of national capacities in demography and ageing is recommended.

Future directions

The Road Map for Mainstreaming Ageing in Moldova is designed to guide the country through the inevitability of continued population ageing while ensuring that the commitments of MIPAA/RIS are upheld, and that older people receive the same opportunities for well-being and participation in society as all other members of the population. Mainstreaming ageing takes time—unlike some other national strategies and plans, the recommendations contained in this Road Map cannot be viewed in terms of two or three years, since they involve complex objectives such as changing perceptions and stereotypes, and systemic transformations in many sectors.

An action plan annexed to this Road Map provides a structured way forward, illustrating goals, actions and timelines; assigning responsibility for implementation of each goal; and identifying indicators for monitoring progress. Formulated in close collaboration with the Ministry of Labour, Social Protection and Family and other government agencies, it is hoped that this action plan will enable to Road Map to truly guide the way towards a society for all ages in Moldova.

STATEMENT FROM MOLDOVAN GOVERNMENT

**Statement made by Ms. Valentina Buliga,
Minister of Labour, Social Protection and Family of the Republic of Moldova**

By joining the Madrid Plan of Action on Ageing, 2002 (MIPAA), Republic of Moldova had assumed the responsibility to undertake actions for settling issues related to population aging and integration of elderly in national policies. The Regional Strategy Plan determines as well the main priorities emphasizing the need to promote measures for extending the participation of elderly people in the economic and social life, strengthening the relations between generations as a priority.

Undoubtedly, the framework policy approach should include the analysis of demographic aging subjects, both in terms of the impact on the social protection of the population system, as well as relating difficulties specific to aging. In the new vision of demographic changes, there is the need to bring the issues related to poverty of elderly people to the forefront, as a consequence of low level of income and pensions, failure of specialized medical services and lack of cheaper drugs for the elderly people, as well as a considerable decrease in the degree of their social integration, increased level of their isolation and withdrawal from community activities.

Given the country sustainable development priorities and the tendency for EU accession, in the best interest of the country, has been assumed the priority for demographic development and promotion of policies aimed at eliminating risks in human development areas. The policies include the strategic vision, highlighting the need to coordinate economic development related to dynamics, number and age structure of the population, which at the moment, unfortunately, is not denoting favorable characteristics for Moldova.

Without effective promotion of demographic policies, the recovery in the birth rate and changing the migration flows, experts are predicting significant changes in population structure, having an impact on the strategic and economic development, raising new demands and problems, in the view of adjusting to a more matured society.

Thus, for solving the problems caused by negative demographic trends in the country, by Government Decision nr.768 of 12 October 2011, has been approved the National Strategic Program in the field of Demographic Security of the Republic of Moldova (2011-2025). The Program outlines the actions aimed to ensure the demographic security, based on viable principles of sustainability and economic security, social cohesion and solidarity among generations.

It has been taken into consideration the fact that the adjustment to demographic aging societies, supposing the understanding by the society, that the increase in the share of the elderly population will create, firstly, a growing pressure on the social security systems and health care security schemes, on the offer on the labor market and the home care system, etc.

In this context, at the request of the Government and the initiative of the Ministry of Labor, Social Protection and Family, with the support of the UN (UNECE) Economic Commission for Europe, has been developed a Guide map for integrating aging policy in the development policies of the Republic of Moldova. In the process of elaboration and national consultations, the document has been coordinated with national counterparts and correlated to overall development policies, including the objectives of the National Strategic Program in the field of Demographic Security. The Guide map on aging includes the in depth assessment of the aging situation in the country, both in terms of conditions and the opportunities of the elderly people, as well as reflecting their problems in the existing policies. The assessment is realized in a participatory manner, involving consultation with a range of stakeholders, supplemented with the conclusions made through field missions, for a better knowledge of the reality, policies, institutions, data and existing researches.

This evaluation places Republic of Moldova in a unique position, undertaking a deep assessment and a contended analysis of the necessary measures to be included in plans for sustainable periods.

Certainly, through the implementation of the Guide map, will be increased the awareness raising (sensitized) of the entire society on the needs of the elderly people, being aware of the fact that an aging society requires the preparation for such kind of conditions, same as the conceptualization and reorientation of the future plans concerning population.

The purpose achieved through this document is aimed at elaborating recommendations for the improvement of compliance with the ten MIPAA commitments, which resume themselves for the insurance of the organic coverage of the aging issues in all political spheres, for the harmonization of the society and the economy in line with the demographic changes, for the development of an accessible society for all ages.

Thus, the aging topic will take a more solid based place on the strategy agenda for social and economic development and governance, as there is the political will for solving the demographic problems and the acquisition of aging problems. The list of operational documents concerning social areas, as pensions and health, confirm the fact that the Government is engaged to reduce poverty among old people and take care for their further social protection.

At the level of functional framework of governance, it will be introduced as well the normative act on institutionalization of the Guide map, in the view of implementation of the UNECE recommendations on policy guidelines on aging issues, which is planned to be approved by Government in 2012.

The main principle of these policies is based on the acceptance of the fact, that a state having a lot of old people does not mean a society composed of inactive people, consuming only the resources, but on the contrary, there is the need to reconsider the manpower of old people, to value their professional life and experience, both, for their families and for economic activity or/and the community. Consistently, it is needed to be created such conditions, which could allow the removal of all obstacles that bring to isolation and discrimination of old people.

On this occasion, we'd like to express our sincere gratitude to the UNECE Expert Team, who brought the financial and intellectual support, showing high professionalism in the elaboration of the Guide Map for integration of aging in the policy fields.

Especially, we would like to express sincere considerations to Mrs. Vitalija Gaucaite Wittich, Chief of the UNECE Population Department, for her warm attitude, support and significant contribution in the elaboration of this project.

Faithfully yours,



Valentina BULIGA
Minister of Labour, Social Protection
and Family

In 2008, the United Nations Economic Commission for Europe (UNECE) established a Working Group on Ageing. This Working Group decided in its inaugural meeting that a key part of its work programme should be capacity-building activities in the form of national 'Road Maps for Mainstreaming Ageing'. UNECE member States may request participation in this exercise, the aim of which is to help countries to translate the internationally-agreed policy frameworks of the Madrid International Plan of Action on Ageing (MIPAA)¹ and its Regional Implementation Strategy (RIS)² into actions that take into consideration the specific national circumstances. These projects entail an in-depth appraisal of the ageing situation in a country, both in terms of the conditions and opportunities experienced by older persons, and in terms of prevailing policies. The assessment is performed in a participatory manner, involving consultation with the broadest possible range of stakeholders, and is complemented by a comprehensive desk review of existing policies and institutions, data and research from the country in question. The purpose of these investigations is to gauge the extent to which MIPAA and RIS are already being fulfilled in the country, and, most importantly, to develop recommendations for enhancing compliance with these internationally-established goals.

The first of the ten commitments of MIPAA/RIS is "to mainstream ageing in all policy fields with the aim of bringing societies and economies into harmony with demographic change to achieve a society for all ages". Such mainstreaming is taken as the overarching goal, and as such the Road Maps consider ageing in all sectors; not only in the economic terms of financing pensions and health care, but also in the broader arena of lifelong learning, labour markets, intergenerational relationships, housing, quality of life, and participation in the social, cultural and political aspects of society.

The Republic of Moldova made a request, via its representative at the second meeting of the UNECE

Working Group on Ageing in November 2009, to be the second country to participate in the Road Map project (the first Road Map was completed in Armenia in 2010). Ms. Larisa Rotaru, the National Focal Point on Ageing for Moldova and the Moldovan representative on the UNECE Working Group on Ageing, was nominated as the national co-ordinator of the Road Map project, representing Moldova's Ministry of Labour, Social Protection and Family (MLSPF). This ministry, under the auspices of the National Commission on Population and Development, has been responsible for the development of a National strategic programme on demographic security for 2011-2025. The Road Map for Mainstreaming Ageing is to be considered in conjunction with this strategy, focusing upon the ageing-related issues which are not highlighted in the main strategy document.

The present report presents the outcomes of the project and summarizes findings, so that they can be shared with other countries in the region. In this first section the project method is outlined and the different stages of its implementation are described. This is followed by a general introduction to the situation regarding ageing in Moldova, and then by an overview of relevant national policy documents, providing a picture of the overall policy framework relating to ageing in the country. The second major section summarizes observations made during the fact-finding missions and through the desk study, organized according to thematic areas identified during the field studies and in broad agreement with the topics covered by the commitments of MIPAA/RIS. The report concludes with a consideration of what lies ahead. A list of sources details the materials consulted and cited, as well as relevant legislation. The list of stakeholders interviewed, the questionnaire used during the fact-finding missions, and a detailed action plan developed by MLSPF are included as annexes.

¹ United Nations (2002)

² UNECE (2002)

METHOD

The Road Map exercise was carried out in several steps. Work began in early 2010 when the general goals and the framework of the exercise were discussed with partners in Moldova and the first reference documents were provided. A desk study was undertaken in which background documents were reviewed and tentative propositions regarding the ageing situation and the corresponding policy framework were developed, to be verified and elaborated upon during the field studies. In March 2010 the first field mission took place, during which extensive interviews and focus group discussions were carried out, covering more than 70 representatives from all identified stakeholder groups including several ministries, NGOs, the private sector, trade unions, academia, media and international organizations. A second field mission in June 2010 served to go into more detail on matters relating to monitoring and evaluation and to fill in remaining gaps. For details of those who participated in interviews and focus group discussions, see Annex II.

Semi-structured interviews were used to assess the general importance attributed to ageing-related policymaking in Moldova, as well as to identify views on specific laws and programmes and their implementation. Respondents were asked to describe good practice examples and to quantify progress and identify challenges. The interviews addressed instrumental issues such as institutional responsibilities, stakeholder participation and integration into international processes. They also explored substantive matters including integration of older persons in society; the image of older persons; health and well-being; social protection; sustainable economic growth; the labour market; education and lifelong learning; migration; gender; intergenerational solidarity; the research landscape; and monitoring and

evaluation. The guidelines used in interviewing are presented in Annex I. Whilst following the guidelines, interviews retained a certain degree of flexibility in order to take account of the interviewees' opinions as to what was most relevant. In addition, visits were made to an older peoples' home and to the gerontological centre, both in Chişinău. A visit to the Transnistrian region, including a discussion with the local authorities, helped to provide additional insights.

This report is based on the findings of both the desk and the field studies. A complete draft of the report was shared with a broad range of stakeholders – once again representing a variety of groups including ministries, NGOs, academics and UN resident agencies – during June 2011. A working group under the leadership of the Ministry of Labour, Social Protection and Family was established to move the work of the Road Map forward, in particular by developing an action plan for implementation of the recommendations of the Road Map (see Annex III). Further desk research was undertaken in the light of new developments in 2011.

In parallel to the development of the Road Map for Mainstreaming Ageing, a National Strategic Programme on demographic security for 2011-2025 has been prepared under the leadership of Moldova's National Commission on Population and Development. It is intended that the observations and recommendations of this Road Map should be viewed in parallel with the Strategic Programme, complementing it with a consideration of ageing which is not a central focus of the strategic programme. Viewed in concert, the Road Map and the National Strategic Programme on Demographic Security for 2011-2025 form a comprehensive approach to the population challenges currently faced by Moldova.

(a) Mainstreaming

The Road Map for Mainstreaming Ageing reflects the principles defined in MIPAA and RIS. It is designed in the spirit of ‘mainstreaming ageing’ — a holistic approach that considers all fields of policymaking and all generations. This means that policies in all relevant sectors ranging from the economy and labour market to housing, transport, health and social protection systems should take population ageing and the needs of older persons into account. When devising laws, regulations, strategies or programmes, the consequences for older persons should be considered.

(b) Participatory approach

Taking a participatory approach is imperative for developing effective and broadly acceptable policies which respond to the concerns of any specific group, including older persons. Such a participatory approach implies that representatives of all relevant stakeholder groups, including government, civil society, the private sector, trade unions, academia and the media are consulted and are involved in developing strategies which address the challenges of ageing societies while at the same time making the most of the opportunities they present. Older persons themselves should explicitly be included in decision-making processes on issues that concern them. In fact, all age groups need to be at the table when discussing issues of intergenerational relationships. Creating a society for all ages means that all age groups should have access to opportunities so that they can live fulfilled lives. At the societal level, there need not and should not be a trade-off between the interests of one generation and another. Reciprocity

and solidarity between generations is both desirable and possible. Broad participation in developing policies ensures their legitimacy and engenders widespread acceptance of their goals and methods.

(c) Life-course perspective

Furthermore, it is important to pursue a life-course approach, recognizing that today’s younger generations will be the older generations of the future. The way younger people live today will greatly influence their quality of life as they grow older — in terms of health, knowledge and skills, and financial security, for example — whilst the policy environment in which younger people live equally affects their ability to prepare for successful and fulfilling older age. A life-course approach acknowledges that the ‘standard’ course of life, in which periods of study, work and retirement follow one another in sequence, is no longer universal and is gradually becoming less common. Periods of work may be intertwined with periods of retraining or caring for family members, successively or simultaneously. Enabling people to combine these elements more flexibly creates new possibilities for all generations. A life-course approach also emphasizes the important role of individual lifestyle choices, including healthy living and saving funds for older age.

When devising strategies in response to ageing in Moldova, these principles — mainstreaming, participatory policymaking, and a life-course perspective — must be borne in mind. These are the underlying principles of MIPAA and RIS that should guide policymaking at the country level.

Table 1: Themes of the ten RIS commitments

1.	Mainstreaming
2.	Participation
3.	Economic growth
4.	Social protection systems
5.	Labour markets
6.	Lifelong learning
7.	Quality of life: health and well-being
8.	Gender
9.	Intergenerational solidarity
10.	Regional cooperation



*Есть лишь одно
страдание-быть одиноким.*

Вы-не одиноки!!!

There is only one tribulation – to be alone. You are not alone!

Alexei Dromashco (©)

Contextual background on Moldova

A. Historical and political context

Moldova is a small, landlocked country situated towards the east of the UNECE region, bordering Romania and Ukraine. It has a population of some 3.6 million people, of whom 53 per cent live in urban areas. The capital city, Chişinău, is home to 19 per cent of the total population.³

At present, Moldova is dealing with a major political deadlock following elections on 5 April 2009. No single party achieved a majority in these elections, making it impossible for Parliament to reach a consensus and elect a President. Two subsequent parliamentary elections (29 July 2009 and 28 November 2010) and one referendum (5 September 2010) have not succeeded in overcoming this political impasse.

Table 2: General facts about Moldova

Full name	Republic of Moldova
Capital	Chişinău
Total population in 2010	3.6 million
HDI in 2010	0.623 (rank 99)
Gross average monthly wage (Moldovan Lei/United States dollars) in 2010	2981.90 / 241.10
Minimum monthly pension for non-agricultural workers (Moldovan Lei/United States dollars) for 2011	641 / 54.81
Average monthly pension (Moldovan Lei/United States dollars) at the end of 2010	810.86/ 66.74
Employment/unemployment rate in 2010 (per cent)	38.5 / 7.4
GDP per capita at current prices, PPP (United States dollars) in 2010	3088

Sources: National Bureau of Statistics (2010b), NCPD (2011a), UNDP (2011a), UNECE (2011a). All data are for the most recent year available and do not include the region of the left side of the river Nistru and municipality Bender.

The second city, Bălţi, contains a further 4 per cent of the population.

Part of the Union of Soviet Socialist Republics from 1940 onwards (following the Ribbentrop–Molotov pact), Moldova proclaimed its independence on 27 August 1991, a few months before the dismantling of the Soviet Union. The period of transition from a totalitarian society with a centrally-planned economy to a liberal democratic society based on a market economy was characterized by political instability and economic regression.

As part of the reform, a new constitution was adopted in 1994.⁴ The president is the head of state, elected by parliament for a four-year term and eligible for a second term. The prime minister, designated by the president, is the head of the government and requires a vote of acceptance by parliament for his or her proposed programme of activities and for the ministerial composition of the cabinet.

A pro-European coalition government was created after the 2009 and 2010 elections by a three party alliance (the Alliance for European Integration) which changed the country's political orientation following eight years of communist rule. However this alliance did not acquire the parliamentary majority required to elect a President.⁵

One of the priorities of the current government is finding a solution for the Transnistrian conflict, which has its roots in the years following Moldova's declaration of independence. A short but bloody military conflict led to the region proclaiming its autonomy. However, this region is not internationally recognized as being autonomous. Despite continuous efforts to solve this issue no consensus has yet been reached.⁶ The Transnistrian conflict not only affects the political stability of the country but also causes problems with data collection for developing national policies. Many data are not available for the Transnistrian region (the region of the left side of the river Nistru and municipality Bender).⁷

³ When considering the city of Chişinău (22 per cent when taking into account the municipality of Chişinău).

⁴ Constitution of the Republic of Moldova (29 July 1994)

⁵ Parliamentary Assembly of the Council of Europe (2011) p.3

⁶ Ibid. p.5

⁷ Unless otherwise specified, data cited throughout this document are exclusive of the region of the left side of the river Nistru and municipality Bender.

B. Economic context

Moldova is the poorest country in Europe in terms of GDP per capita,⁸ and the third poorest in the UNECE region (after Kyrgyzstan and Tajikistan).⁹ The UNDP Human Development Index (HDI) places Moldova in 99th position out of 169 countries,¹⁰ below the regional and even the world average level.

The collapse of the Soviet Union triggered a deep economic recession that lasted for a decade. Government reforms, however, together with the increasing size of remittance flows, contributed to a period of steady economic recovery and growth. By 2008 the real GDP had risen to 1.6 times its 2000 level, and GDP per capita for the same period increased by 4.8 times (from 354 to 1,694 United States dollars at current prices).¹¹ However, average real wages were still 28 per cent lower than their 1990 level.

Living conditions have improved considerably since the turn of the twenty-first century. In 2009, 26.3 per cent of the population was still living in poverty,¹² but viewed relative to the level of 67.8 per cent recorded in 2000, this represents significant progress.¹³ Moldova was hit hard by the global economic crisis in 2009. GDP fell by 6.5 per cent during 2009,¹⁴ although recovery has also been rapid and in 2010 the growth rate returned to 6.9 per cent.¹⁵

Traditionally Moldova has been an agrarian-industrial country. Industry is concentrated mainly in the Transnistrian region (the region of the left side of the river Nistru and municipality Bender); in 1990 Transnistria generated 40 per cent of the country's economic output including 33 per cent of its industrial production and 90 per cent of its energy.¹⁶ Hence the loss of control over this region has been a considerable blow for the country's economy. Having an abundance of arable land and with no significant quantity of mineral resources, Moldova's economy has relied mainly on agriculture. In the 1990s over half of the workforce was employed in this sector and it was responsible for almost 30 per cent of the GDP. During the last decade, the structure of the Moldovan economy changed radically, with a major decline in the importance of agriculture. Figures for 2010 indicated that agriculture employed 28 per cent of the work force and accounted for 13.4 per cent of the GDP.¹⁷

⁸ Vaculovschi et al (2011) p.17

⁹ UNDP (2011b)

¹⁰ Ibid.

¹¹ Ministry of Economy and Trade (2009). Note that considerably higher GDP per capita figure in the table 1 results from using the standard international Purchasing Power Parity (PPP) rate and not the current market exchange rate.

¹² Vaculovschi et al (2011) p.45

¹³ Ibid. p.45

¹⁴ Ibid. p.46

¹⁵ National Bureau of Statistics (2010a)

Formal labour force participation rates have been in decline since 2000, falling from 54.8 per cent in 2000 to 38.5 per cent in 2010. Unemployment stood at 7.4 per cent in 2010.¹⁸ In terms of gender, the proportion is well balanced, with women representing 49.9 per cent of employed persons. The difference between employment in urban and rural areas has slightly increased with a 42.7 per cent in urban areas and 35.4 per cent in rural areas. Full time employment dominates the market, with a 90 per cent share. More than a quarter of employed persons are not satisfied with their job, the main reason being the low income. Moreover, 18.1 per cent consider their current job to be beneath their level of qualification.¹⁹

An important aspect of the Moldovan economy is the remittances sent back home by migrant workers. In 2010, over 25 per cent of the active population was working abroad.²⁰ The volume of remittances has increased continuously since the mid 1990's, reaching a peak in 2006 when the amount of money received as remittances represented 34.6 per cent of the GDP. Following the global economic crisis, the ratio of remittances to GDP dropped to 22.4 per cent in 2009 (rose to 23.6 per cent in 2010),²¹ putting Moldova in second place in the UNECE region after Tajikistan.²²

C. Demographic context

The size of Moldova's population reached a peak in 1992 at 4.4 million, and has been declining continuously since then. The rate of decline was greatest during the period 2000-2005, during which the population (including that of the region of the left side of the river Nistru and municipality Bender) declined by an average of 1.73 per cent per year. The rate of decline has now slowed and stands at a projected 0.68 per cent per year in the period 2010-2015.²³

Fertility in Moldova declined to very low levels following the collapse of the Soviet Union,²⁴ compounded by an 'echo' of low fertility in the preceding generation (cohorts born in 1965-1970), so that the pyramid below shows a significant narrowing in the cohorts born since 1990. Fertility has been below replacement level since the early 1990's.

¹⁶ Vaculovschi et al (2011) p.43

¹⁷ National Bureau of Statistics (2010b)

¹⁸ Ibid.

¹⁹ National Bureau of Statistics (2010a)

²⁰ Estimates based on data of National Bureau of Statistics (2011a)

²¹ World Bank (2011a)

²² Ibid.

²³ United Nations Population Division (2011)

²⁴ Official statistics differ noticeably from United Nations figures. Although the latter include the region of the left side of the river Nistru and municipality Bender and the Moldovan national statistics do not, this cannot account for the magnitude of the difference. The figure used in table 3 is from the United Nations.

According to the population census in 2004, the majority of the population, 75.8 per cent, is ethnically Moldovan. Ukrainians are the second largest group (8.4 per cent), followed by Russians (5.9 per cent), Gagauz (4.4 per

cent), Romanians (2.2 per cent) and Bulgarians (1.9 per cent). Other small ethnic groups represent about 1 per cent of the population.²⁵

Table 3: Selected demographic indicators for Moldova, 2010*

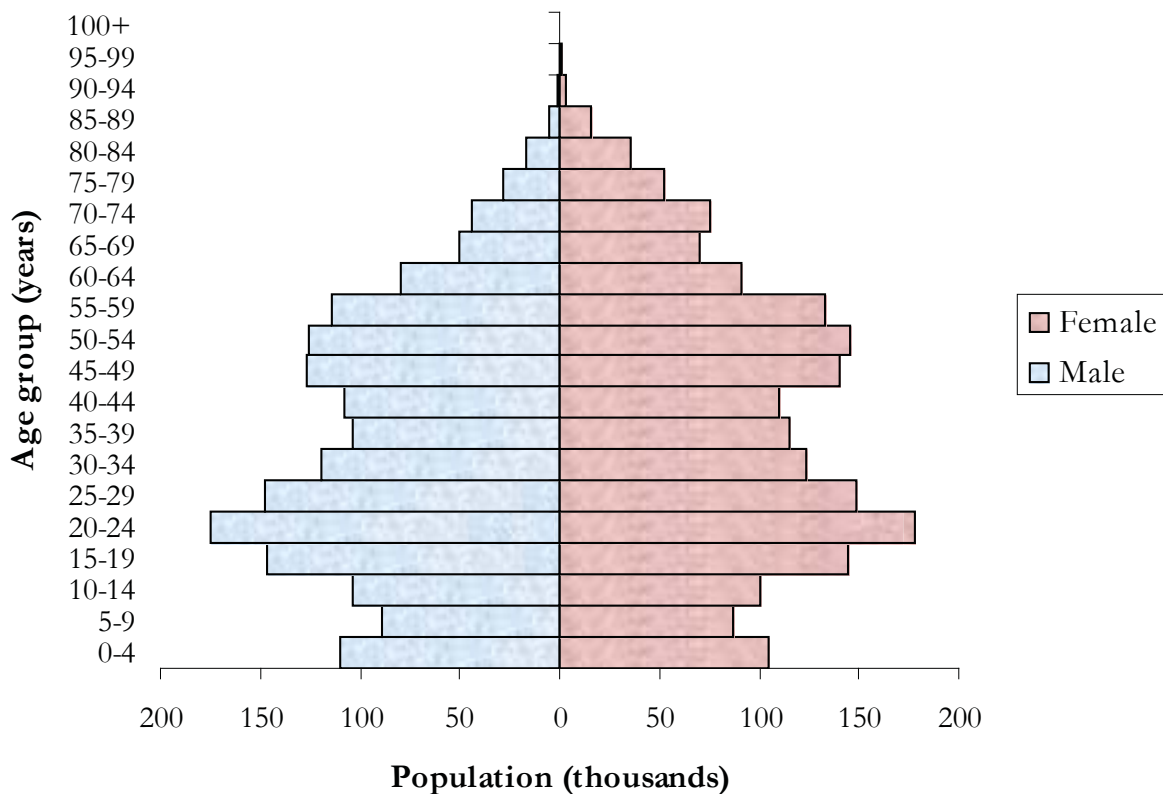
Life expectancy at birth (years)	66.15 (male); 73.48 (female)
Life expectancy at age 65 (years)	12.01 (male); 14.98 (female)
Total Fertility Rate (children per woman)	1.45
Median age (years)	35.17
Population growth rate (per cent per year)	-0.68
Net migration rate (per 1,000 population)	-5.87
Population aged 65 years or above (per cent)	11.15

Source: United Nations Population Division (2011).

Note: These estimates include the region of the left side of the river Nistru and municipality Bender and due to this and the differences in estimation and modelling methods they may differ slightly from Moldovan official statistics, which exclude it..

* Life expectancies, total fertility rate, population growth rate and net migration rate are medium-variant projected annual averages for the period 2010-2015.

Figure 1: Age structure of the population of Moldova, 2010



Source: United Nations Population Division (2011).

Adrian Blaranu

²⁵ National Bureau of Statistics (2010b) p.40

D. Institutional framework for ageing-related policies

The main responsibility for ageing-related policies in Moldova lies with the Ministry of Labour, Social Protection and Family, and specifically with the demographic policy section.²⁶ Other departments of this ministry are involved in particular areas; these include the departments of employment relations and social partnership, human resources development and employment policies, wage policy, insurance policies, social assistance, the social protection of people with disabilities, and analysis, monitoring and policy assessment. For specific issues related to health care or education, responsibility lies with the respective line ministries. Table 4 shows the ministries which make up the current Government of Moldova.

There is no purely inter-ministerial mechanism specifically dedicated to discussing cross-cutting issues on ageing or intergenerational relations. However, several different ministries are involved in the National Commission on Population and Development, which is headed by the Deputy Prime Minister, with the Minister of Labour, Social Protection and Family as its vice-president.²⁷ The Commission, established in 2007,²⁸ is in charge of coordinating population and development-related activities between ministries, academia and civil society, and is supported by several international organizations. It has the task of analyzing demographic phenomena,

identifying priority issues, programmes and policies, devising strategies and making recommendations. Its Executive Office consists of a president and vice-president, along with the deputy minister of health, the director-general of the National Bureau of Statistics, and the Programme Coordinator of UNFPA Moldova. The Commission's Secretariat, which carries out the day-to-day functions of the Commission, is composed of the staff of the demographic policy section of the Ministry of Labour, Social Protection and Family, whose chief of section also serves as the secretary of the Commission.

A major element of the Commission's work in 2010 was the drafting of a National strategic programme on demographic security for 2011-2025, intended to serve as an instrument to guide population policies in the future. A draft of this Strategic programme was opened for public consultation during 2010, and the final version of the Strategic programme incorporates contributions made during this consultation period. Since the Strategic programme makes only limited reference to the challenges of ageing, it is intended that the observations and recommendations of the present Road Map will be treated as a complementary document, to be viewed in association with the Strategic programme, giving the National Commission on Population and Development the same powers of oversight (monitoring, evaluating and ensuring implementation) over the Road Map as over the whole Strategic Programme on Demographic Security.

Table 4: Ministries of the Republic of Moldova as of September 2011

Ministry of Economy
Ministry of Finance
Ministry of Justice
Ministry of Internal Affairs
Ministry of Foreign Affairs and European Integration
Ministry of Defence
Ministry of Regional Development and Constructions
Ministry of Agriculture and Food Industry
Ministry of Transport and Road Infrastructure
Ministry of Environment
Ministry of Education
Ministry of Culture
Ministry of Labour, Social Protection and Family
Ministry of Health
Ministry of Technologies and Communications
Ministry of Youth and Sports

²⁶ The Ministry of Labour, Social Protection and Family was created by law no. 21-XVIII (18 September 2009). Between 2006 and 2009 the equivalent ministry was the Ministry of Social Protection, Family and Child. Prior to this there was a Ministry of Health and Social Protection which in 2006 was

divided into the Ministries of Health and of Social Protection, Family and Child.

²⁷ More information on the Commission can be found at <http://demografie.md/>

²⁸ By Government Decision no. 126 (7 February 2007)

Recommendations

1. Continue to develop mechanisms for coordinated inter-ministerial collaboration on policymaking related to ageing, especially through the work of the National Commission on Population and Development.
2. Strengthen the role of the National Commission on Population and Development in implementing the Strategic programme on Demographic Security and the recommendations of the present Road Map for Mainstreaming Ageing, including establishing a basis for allocation of ring-fenced funds targeted at the implementation of the actions identified in the action plan.
3. Build capacities within regional and local authorities (at all levels from communes to districts) to enhance their ability to undertake whatever actions may be relevant to them in the implementation of ageing-related policies formulated at the national level. In particular, establish coordination mechanisms to facilitate exchange of information between these different authorities so that they can learn from good practices existing elsewhere.
4. Explore possibilities for setting up structures, whether formal or informal, similar to the National Commission on Population and Development (possibly sub-branches of the national commission) at the levels of regional and local authorities, to enhance coordination and exchange of information and good practices between these authorities and non-state actors such as NGOs.



Nu neglijați bătrânii...

O societate prietenoasă cu toate generațiile...

Do not neglect older people... A friendly society for all generations...

Adrian Blănaru (©)

The policy framework: overview of existing laws and regulations

A. Introduction

This chapter provides an overview of some of the most important national policy documents relevant to the issues of ageing and older persons in Moldova. The National strategic programme on demographic security for 2011-2025 and the Green Paper of the Population are given the most attention, being those which deal most explicitly with themes relating to ageing. In addition, our bibliography contains a comprehensive list of laws and Government decisions pertaining to the topic areas covered in MIPAA/RIS and in this Road Map.

While this section describes the official policy background, it should be noted that the policy approaches of United Nations resident agencies also play an important role in shaping the direction taken in economic and social development strategies in the country. In this regard it is noteworthy that the United Nations Country Team is in the process of developing a new UNDAF for 2013-2017 (to supersede the current UNDAF whose period of validity has been extended to 2012), and that a new common country assessment is being conducted in preparation for this. It is intended that the UNDAF should be closely aligned with the new National Development Strategy 'Moldova 2020' (discussed later in this chapter), and it is therefore important that the recommendations of this Road Map are considered in the development of both.

B. National strategic programme on demographic security for 2011-2025²⁹

The National Strategic Programme on Demographic Security for 2011-2025 is currently the most important Moldovan policy document relating to population issues. It was drafted under the leadership of the National Commission on Population and Development and then opened for public consultation during 2010.³⁰ It covers the full range of demographic themes relevant to Moldova, including some sections pertinent to the commitment areas of MIPAA/RIS: population ageing, the social insurance system, emigration, and family policies.

The Strategic programme begins with a description of the demographic situation, a 'Strengths, Weaknesses, Opportunities and Threats' (SWOT) analysis and an outline of the demographic challenges currently faced by Moldova. Problems detailed in this section include

negative population growth; increasing proportions of older persons, especially in rural areas and notably a feminization of older age groups; emigration of people of working age and associated problems of 'brain drain' and family breakdown; and difficulties in financing social protection given these demographic trends. The Strategic programme continues with chapters on strategic directions for policy, adaptation to the new demographic situation, budgets, expected results and risks, and an outline of steps needed for implementation as well as plans for monitoring and evaluation.

While many of the sections focus on statistical elements of demographic change, such as the proportions in the working-age groups, proportions above retirement age, and numbers entitled to pensions, the Strategic programme does also refer to some of the broader qualitative themes related to ageing and older persons. Recognizing through its various projection scenarios that further population ageing is inevitable, the Strategic programme states that Moldova must adapt to these changes in age structure. It specifically notes that the country is engaged in efforts to implement the commitments of MIPAA. Relevant measures referred to in the Strategic programme include, amongst many others: the importance of ensuring equal opportunities for all social groups; increasing the general level of education; enhancing awareness of population challenges; development of intergenerational solidarity; adopting strategies for lifelong learning; active engagement of older persons in the labour force and measures to combat their discrimination in the workplace; removal of incentives for early retirement; creation of enabling environments for work-life balance and family responsibilities; health promotion throughout the life course; and support for family-based care providers. It is suggested that the Government will have to make some unpopular changes such as gradually increasing the retirement age, equalizing the retirement ages of men and women, and introducing private pensions to complement to social insurance pension.

Much of the focus of the Strategic programme is on measures to stimulate increases in fertility. The document notes Moldova's commitment to the Plan of Action of the International Conference on Population and Development (ICPD) and the importance of ensuring that all policies related to population adhere to this; for example, in promoting reproductive health and rights. In this regard it must be emphasized that stimulation of fertility should only be promoted as a policy insofar as it entails enabling couples to fulfil their own fertility desires. Increased fertility cannot prevent population

²⁹ National Commission for Population and Development (2011)

³⁰ See section on institutional framework in Chapter I.

ageing, although it may mitigate its speed and severity; therefore, promotion of fertility should not be viewed as a central component of ageing-related policy, but instead the ability to achieve one's family-building goals should be an end in itself.

C. Green Paper of the Population³¹

The Green Paper of the Population of the Republic of Moldova, prepared under the leadership of the National Commission on Population and Development with the support of UNFPA, outlines levels and trends of demographic phenomena in Moldova during the period 1990-2008, viewed in the context of broader demographic change in Europe and across the world. It then forecasts demographic developments for the years 2010-2050 and discusses the potential economic and social implications of these developments. The major themes are depopulation and population ageing, caused primarily by a combination of low fertility and emigration.

A section of the Green Paper is devoted to the older population and the social insurance system. It is noteworthy, however, that the focus is very much on statistics; that is, on the proportions of older persons in the population, the percentages receiving pensions, and the ratios of older persons to those in the working ages. The quality of life and well-being elements of MIPAA/RIS are not discussed in any depth, except with reference to the need for prolonged working lives and healthy, active ageing in order to reduce dependence on the social protection system. A recommendation of this section is that a private pensions system should be introduced.

The Green Paper concludes with a call for the development of a national population strategy focusing on three strands of action; fostering increases in fertility, reducing mortality, and bringing migration down to "acceptable levels".³² It emphasizes that such objectives can be met only through broader social objectives such as improving levels of health, education and environmental quality. It adds that the establishment of a National Demographics Centre and a national school of demography will be crucial to building capacities to monitor and improve the country's demographic situation. The Green Paper recognizes that fulfilling these objectives will be expensive, and argues both for the redirection of resources and for a focus on economic growth in order to create more resources.

Whilst the Green Paper gives an extremely thorough demographic analysis of Moldova's population, it is important to recognize that the health, economic

stability, social inclusion and overall well-being of older persons (or indeed of any population group) cannot be secured by favourable demographic ratios alone. The focus of the Green Paper is on tackling changes in the age structure through measures to enhance fertility, limit emigration etc., which are indeed important elements of a comprehensive demographic strategy. However, as the following sections of this Road Map discuss, such a strategy must also include components relating to social inclusion, health, counteracting stereotypes, and fostering positive intergenerational relationships, which depend more on social attitudes and priorities than on age structure.

D. Other policy documents

Preceding policy documents

The current institutional framework builds upon the foundation of preceding strategies which have shaped the national development agenda of Moldova. These include the Economic Growth and Poverty Reduction Strategy (EGPRSP) 2004-2006,³³ followed by the National Development Strategy 2008-2011,³⁴ both developed in conjunction with the IMF. These two strategies comprised overarching plans for development in the medium term, setting out principles for sustainable economic growth as the fundamental pillar of poverty reduction. They both provided analyses of the prevailing situation, including identification of vulnerable groups, and put forward recommendations for action. The National Development Strategy also considered what it termed 'negative demographic trends'; that is, demographic ageing and the concomitant problems of ratios of working people to pensioners, and financing of healthcare. It reported that pension reforms since 1998 had not yet met the expected objectives, and that pensions remained very small. Some of the recommendations proposed in these two strategy documents were specific or relevant to older persons, such as efforts at deinstitutionalization of older persons and increased use of community-based care where possible; extension of home-based care services beyond those living alone; and the broadening of social guarantees, medical and educational services.

The Annual Social Reports published by the MLSPF,³⁵ whilst reporting on the current situation rather than being policies in themselves, do nevertheless constitute a part of the institutional framework for ageing-related policymaking insofar as they contain recommendations

³¹ Matei et al. (2009)

³² Ibid. p.35.

³³ Government of Moldova (2004)

³⁴ International Monetary Fund (2008) and Law no. 295-XVI (21 December 2007)

³⁵ The latest Annual Social Report 2010 was published by MLSPF in late autumn 2011 after the Road Map document was finalized.

from the ministry relating to the social situation and social protection system. The Annual Social Report 2009,³⁶ for instance, summarizes a decade of reforms of the Moldovan social protection system. Analyzing each different element of the social protection structure and evaluating its impacts, the report finds that the difficulties of the transition period continue to present complex problems. The report reviews the various components of social insurance and social assistance, assessing their evolution over time and reporting on numbers of beneficiaries. A chapter devoted to the pension system finds that the current system is unsustainable without a significant increase in the number of contributors and/or their incomes. It reports that the size of pensions is insufficient to meet minimum subsistence levels; the replacement rate of pensions is decreasing over time; and the system is unduly complex. Recommendations include the removal of the special pension regime accorded to agricultural workers; the recalculation of old age pensions for those who continue to work beyond the statutory retirement age; and the simplification of formulas for the calculation of pension entitlements.

Activity Programme 2011-2014 “European Integration: Freedom, Democracy, Welfare”³⁷

The Government Activity Programme for 2011-14 supersedes the programme of the same title developed for the period 2009-2013. Unlike the previous document, this new strategy contains multiple explicit references to issues of direct relevance to the Road Map for Mainstreaming Ageing. The introductory section on overall priorities states that the Government “will create economic and social opportunities for both young and elderly people”,³⁸ and the sections on social assistance and social insurance list priority actions which are closely aligned with those identified in the following chapter of the present Road Map.

Within the chapter on social policies, a section is devoted to demographic policies. An objective is formulated as follows:

“Consistently address the demographic challenges in order to reduce population decline and create conducive conditions for population growth, in terms of quantity and quality, making the link between the demographic security and the economic and social security for development purposes.”³⁹

Specific actions identified include, amongst others, the approval and implementation of the National strategic

programme on demographic security for 2011-2025; efficient management of population ageing; promotion of intergenerational solidarity and gender equity; improved and formalized methods for production of demographic projections; enhancing the institutional framework for demographic policymaking, implementation and monitoring; and the establishment of a Demographic Centre in the Academy of Sciences.

National Development Strategy ‘Moldova 2020’ for 2012-2020⁴⁰

The formulation of the second National Development Strategy, following the precedent set by the Economic Growth and Poverty Reduction Strategy and the first National Development Strategy, is set to take place in a framework of broad public consultation. Indeed, the establishment of a National Council for Participation was mandated in 2010⁴¹ to facilitate the inclusion of stakeholders in development of the strategy. Online consultation, public debates and seminars, and targeted consultation with identified stakeholder groups aim to make the process fully participatory with the intention that the resultant strategy should be comprehensive and widely accepted, with a sense of national ownership. The strategy will be designed as a long-term planning tool; hence it will cover the period 2012-2020, roughly in line with the EU budget cycle which runs from 2014-2020.

At the time of writing, planning for the creation of this strategy had progressed as far as the identification of seven priority areas and a one-page summary for each of these areas, outlining the issue, the goals, the actions needed, likely monitoring indicators, and the main entities responsible. The intention is to adapt and flesh out these according to the feedback received through public consultation.

The seven priority areas currently planned for inclusion in the strategy are: education, roads, finance, business, energy, social insurance and justice. In the initial stages, a one-page summary of the key issues, actions, goals, monitoring indicators and implementing bodies is given for each priority area. As pointed out in a position paper drafted by the United Nations resident agencies in Moldova (UN Moldova 2011), these priority areas are focused primarily on the economic aspects of development, leaving the issues of social inclusion, social justice, human rights and freedom largely out of the picture. The position paper, responding to these omissions, stresses that a comprehensive approach to development “should establish a vision which is not limited narrowly

³⁶ MLSPF (2010)

³⁷ Government of the Republic of Moldova (2011)

³⁸ Ibid. p.6

³⁹ Ibid. p.67

⁴⁰ For current status of formulation of the strategy and to see documents open for public consultation see <http://www.cancelaria.gov.md> and <http://particip.gov.md/2020>.

⁴¹ Government Decision no. 11 (19 January 2010)

to economic development, but recognizes the value and importance of social, human advancement, justice and freedom aspects of development”.

The priority area on social insurance, in its initial formulation presented by the Government for consultation, focuses exclusively on pensions (Government of the Republic of Moldova, 2011). It explains that a move from an unfunded scheme based on the principle of solidarity to a funded, personalized scheme is necessary but will bring high transition costs, which will need to be financed somehow. It adds that the development of private pension funds is necessary to make the system viable. It identifies important monitoring indicators including the effective age at retirement, the average pension substitution rate, and the ratio of employed people to those drawing pensions. It notes that a sustainable scheme must create incentives for employed people to declare their incomes and contribute to their own future pensions.

The new National Development Strategy is forecast to be submitted to Parliament for approval by the end of 2011. The feedback given by the United Nations Country Teams and others will, it is hoped, contribute to giving it a broader developmental scope so that the needs of vulnerable groups, including older persons, are better accounted for.

E. Conclusion: ageing in the Moldovan policy agenda

Ageing is clearly a central topic on the Moldovan policy agenda. The creation of the National Commission on Population and Development, the preparation of the National strategic programme on demographic security for 2011-2025, and the inclusion of ageing-related themes in other policy documents makes this clear. The continued willingness of United Nations resident agencies to include references to the needs of older persons in their ongoing strategic planning backs up this impression. The multiplicity of laws and Government decisions pertaining to social protection, pensions and health confirm that the Government is committed to reducing poverty and vulnerability amongst older persons. The issue, then, is to ensure that ageing is viewed holistically, in terms that recognize the challenges faced by older persons themselves and the contributions they could make to society if it is set up to welcome such contributions, as well as in a way that accepts that ageing is an ongoing process throughout the life course, rather than an either/or state triggered by a person reaching a particular age or life transition. This means that the Moldovan policy agenda must be broadened to extend beyond what is often principally a consideration of age structure, demographic rates and economic imbalances. It is hoped that this Road Map, based on the commitments of MIPAA/RIS, will bring such issues into the foreground.



Older people... alive under wrinkled skin
Nataly Kanonik (©) - Andrey Rotary (design)

Observations from the field study and recommendations

A. Introduction

Two fact-finding missions were carried out by UNECE Population unit staff in 2010, during which semi-structured interviews were conducted with representatives of all relevant stakeholder groups (including government, civil society, the private sector, academia, trade unions and international organizations operating in the country), based on an open-ended questionnaire (see Annexes I and II for the questionnaire and the list of interviewees). The main findings of both the field visits and the associated desk study are summarized in this chapter. The topics are organized, where possible, according to the commitment areas of MIPAA/RIS—although commitments 1 and 8 (mainstreaming ageing, and mainstreaming a gender approach) are not treated separately as they are intended to be cross-cutting throughout each of the other sections. Furthermore, some commitments feature more than once since different aspects of the commitment are covered by different sections of the Road Map as, for example, with commitment 2 which is linked to the first three sections below. At the end of each section, recommendations are given based on the observations in the text.

B. Observations and recommendations on areas related to the ten Commitments of the RIS

1. Integration of older persons in society

RIS Commitment 2: To ensure full integration and participation of older persons in society

The World Summit for Social Development held in Copenhagen in 1995 defined successful social integration as the attainment of a ‘society for all’. Social integration is truly attained when all groups in society, including minorities, are able to enjoy full access to the opportunities, rights and services available to members of the mainstream of society.

MIPAA expanded on this definition of social integration by calling for a society for all ages. Challenging prevailing views which saw the relationships between generations and the roles of different age groups in social, economic,

cultural and political spheres as being necessarily antagonistic, MIPAA called for a recognition of the possibilities for complementary, mutually beneficial roles for people of all age groups, resulting in a diverse yet integrated society. Such a scenario demands acknowledgement of the benefits of active and healthy ageing, through which older persons, whether citizens, immigrants or refugees, are enabled and encouraged to play their part in building a stable society anchored in solidarity and reciprocity between generations. Integration and participation are therefore closely linked to notions of social cohesion, minimizing disparities and avoiding polarization and conflict.⁴²

Yet the barriers to older women’s and men’s integration into social, economic, cultural and political life are numerous and pervasive, evident at the global level and manifested in particular ways in Moldova. These include poverty, lack of access to, or information about, services and entitlements, low priority attached to health care for older persons, and persistent, often self-perpetuating negative images of older persons, such as the idea that quality of life is inevitably diminished in older age. Such barriers to the integration of older persons may reinforce the tendency to frame population ageing as a problem that needs to be avoided or reversed. In fact, population ageing is an inevitable element of demographic transition and hence rather than trying to avoid it, it is critical to develop a policy environment that enables and encourages integration and participation of older persons, and that relies increasingly on their skills, experience and wisdom—not only to take the lead in their own betterment but also to participate actively in that of society as a whole.

(a) Economic integration

Bringing about increases in labour force participation of all age groups is key to mitigating some of the challenges of population ageing. The current labour force participation rates of men and especially of women over 55 years of age in Moldova are low, underpinned both by the pervasive belief that individual productivity declines with age, and by widespread subscription to the ‘lump of labour’ fallacy: that is, the widely-held but false view that there is a fixed quantity of work to be done within an economy, so that by remaining in the work force, older workers deprive the younger generation of

⁴² UNECE (2009)

jobs. Both of these ideas should be challenged explicitly: individual productivity is more related to physical fitness and mental agility than to calendar age, and the amount of work available to the workforce as a whole is not exogenous. The absence of opportunities to update training and skills, together with a lack of age-friendly labour market policies, contribute to the perception that the productivity of older persons is low. This highlights the importance of continuous professional training and decent working conditions so that such perceptions are no longer reinforced.

Commitment to lifelong learning would increase the productivity and working life of older persons who have a lifetime of experience and, collectively, an immense accumulation of knowledge. Investment in extended labour market participation through continuous learning is required not only from the government but also from employers (who would benefit from a better trained, more up-to-date work force) and workers (who would benefit from improved skills which may intern command better incomes). Efforts should be made both to broaden the offering of continuing education and training programmes, and explicitly to include older workers in such programmes.

Apart from ongoing training in the workplace, education programmes for those already in retirement or those pre-pension-age persons who are not active in the labour market would make a large contribution to improving the social and economic position of older persons. There is currently no organized education for retired persons or pre-pension-age persons who are out of work in Moldova. However, the concept of the University of the Third Age, which provides a learning environment specifically for older persons, has become increasingly widespread in the ageing societies of Eastern Europe over the last decade. Moldova may be able to benefit from these countries' experiences, adapting their models to its own circumstances.

(b) Social integration

The older generation constitutes a substantial portion of the electorate (not least because absentee voting by emigrants, who are usually younger, is often difficult, making the relative influence of the older, resident voters even greater). As a group, then, older people hold considerable voting power in Moldova. This makes it important for the government to invest in the political literacy of the older population. Yet age discrimination is sometimes evidenced in barriers restricting older people's participation in political activity. The social exclusion that many older people encounter is compounded by political exclusion, such as exclusion from political debates and

activities relating to their interests, and in which their presence would have the potential to affect outcomes across a range of policy areas.

Encouragement of older persons to represent themselves and their peers in decision-making can be achieved via active older citizens' groups and organizations. Some older people are now taking part in new forms of political activity, marking a shift of focus from self-help to campaigning. This indicates a willingness amongst older people to participate in political activity around issues directly affecting them. They frequently gain strength and encouragement from campaigning achievements. This offers the potential for wider capacity-building among older people. By supporting such activity, and by involving older people in the development of the policies and services that affect them, health and social care workers can support older people to pro-actively counter discrimination and to influence issues of relevance to them.

(c) Cultural integration

Enhancing cultural participation could help in meeting some of the challenges of demographic change, by developing the motivations of older women and men to actively engage in community life and in volunteer activities, some of them with an intergenerational focus. Since cultural integration implies a particularly intensive form of social participation, older people who stay culturally active also tend to have a higher-than-average interest in education programmes, social engagement and community positions.

Among the most important barriers to engagement in cultural activities (whether community-based such as social club activities, or visiting cultural institutions such as theatres or libraries) are insecurities about travelling to and from these events, social isolation in residential care, and a lack of knowledge about available opportunities.

The rural environment has changed dramatically through large-scale migration, leaving a considerable number of people to grow old in isolated rural areas, rather than in the traditional environment of an extended family. They are often without adequate transportation and support systems. Transport provides an essential link to friends, services and the wider community – a vital route to maintaining independence. Lack of mobility can prevent older persons from participating in social activities and lead to loneliness and isolation. A large proportion of older people in Moldova, both in rural and in urban areas, is dependent on public transport. A sustained effort is necessary to tackle the barriers to mobility which they report, including low availability of public transport in rural areas; poor access to travel information such as new routes or price changes; poor attitude of transport

providers and drivers to older persons; and badly-lit waiting areas or stops. Cost remains a significant factor limiting people's ability to travel as often as they would like. Methods for maximizing access to transport should be considered very carefully; replacing free transport services for older persons with subsidized monetized systems may jeopardise access to public transport unless the size of subsidies is closely linked to actual prices.

Volunteering, both by the younger generation and older persons themselves, could be developed into a powerful way to strengthen community cohesion, mobilize largely untapped local resources and promote participation of older persons a variety of realms, in a concrete way. An

existing network of over 250 older volunteers with an average age of 66 years already operates in Moldova. This network has introduced an active sustainable structure of peer support between older women and men in rural communities where the number of members of the working-age population is low. Scaling up these self-help networks of older generations, and recognizing the model formally by ensuring the participation of these community-based groups in local decision-making could have a number of positive effects: it may result in a more cost-effective form of emotional and physical support very close to the clients, and at the same time may foster greater cultural and political engagement.

Recommendations

5. **Engage in public awareness-raising activities to tackle age discrimination at work, and especially to correct misconceptions relating both to the assumption of inevitable declines in productivity with advancing age, and to the 'lump of labour' fallacy.**
6. **Support a flexible labour market that recognizes the differing effects of ageing on individual productivity depending on the nature and demands of the job in question; productivity may indeed drop in jobs centred around physical labour, but mental productivity can easily be age-independent or indeed can increase with age.**
7. **Promote new working arrangements and innovative workplace practices aimed at sustaining working capacity and accommodating the needs of older workers as they age, by setting up employee assistance programmes.**
8. **Promote both public and private investment in lifelong learning initiatives and develop incentives for participation of all ages groups in such initiatives.**
9. **Encourage the activities of older persons' groups, especially where such groups have a campaigning or political element.**
10. **Take measures to enable the full and equal participation of older persons, in particular of older women, in political decision-making through provision of and facilitation of access to information.**
11. **Acknowledge that the limited physical and social activity levels of many older people may limit their ability to take part in political, social and cultural life, unless such participation is pro-actively facilitated; take measures to ensure that poverty or isolation do not lead to social exclusion of older persons.**
12. **Ensure that accurate and properly updated information on public transport facilities is available, especially in rural areas; that transport services run according to their schedules; and that waiting areas are safe. Take measures to tackle negative attitudes of transport providers towards older persons.**
13. **Recognize and encourage self-help networks of older persons and volunteers of all ages working for the better integration and assistance of older persons.**

2. Perceptions and images of ageing and older persons

RIS Commitment 2: To ensure full integration and participation of older persons in society

(a) Existing media coverage

The general societal perceptions of older persons and ageing are important in shaping potential policy strategies. The media have a role in perpetuating – or questioning – common views on ageing and older persons.

Ageing and older persons are not generally covered with much frequency by the Moldovan media. Journalists tend to think (accurately or otherwise) that audiences will find stories concerning older people to be uninteresting. Such topics are viewed as relating to the long term, whilst it is issues of day-to-day or short term concern that journalists find to be more appealing to their audiences. The media seem to focus mainly on politics and celebrities. This bias appears to stem more from subjective interpretations on the part of journalists than from actual evidence of audience preferences, since research to determine which topics are of interest to audiences is scarce. According to some observers, the choice of topics to cover may also be driven by focusing on a celebrity whose appearance might attract advertisements.

When ageing or older persons are covered in the media, the reporting is usually about older people's struggle to survive on very low pensions, expressing sympathy for their difficult circumstances. In addition, reports may cover the opening of an older people's home or may feature older persons taking care of their grandchildren when their children have migrated. Beyond such family care, the active contributions and potentials of older persons are rarely acknowledged.

The investigative newspaper *Ziarul de Garda* reported having a large readership of older persons who often provide them with their personal stories. To appeal to the interests of a somewhat older and generally well-educated readership, the paper reports on the challenges met by older persons in their daily lives, and portrays them as heroes in their struggle to make ends meet. Among the stories they report on are accounts of older persons selling small goods in the market and being forced to pay bribes; the problems faced by older teachers; and the injustices of the pension system in providing more benefits to certain officials than to ordinary recipients.

Moldovan television is thought to reach a broader audience than print media. News coverage on television is driven largely by the pursuit of ratings, and as such 'yellow press' topics (that is, stories which are

sensationalist, often lacking in evidence or research) are more likely to be picked up than more serious themes. The channel Moldova 1, however, has produced talk shows about social issues as well as documentaries, for example about an older people's home in the region of the left side of the river Nistru and municipality Bender.

It may be useful to reach out more to television journalists, highlighting some of the interesting aspects of reporting on older people's concerns and older people's potential to contribute actively to society. Given the interest of young people in television production, young professionals or media students could be involved in a project to report on an issue concerning older people or to make a television production together with older people, thus raising awareness amongst youth of the issues at stake.

The *Independent Journalism Centre*⁴³ could be involved in a project to monitor media reporting on ageing, based on their experience in monitoring topics of specific public interest in the past. They could also be instrumental in organizing training for journalists on means of avoiding stereotypes, and on fostering high-quality reporting about ageing and older persons.

While raising awareness amongst journalists is important, the government may also wish to enhance its own capacity to reach out to the media and thus to the wider public. Government press agencies should actively inform the public about current topical issues relating to ageing and about the activities undertaken by different authorities in relation to these issues. This should entail more than merely disseminating press releases; active personal links should be maintained with a network of key journalists. Journalists have noted that they receive many press releases from the ministries that are not well targeted to their needs, because they cover minor events, use administrative language and are lacking in attention to the human interest aspect of the stories. The press offices of the ministries should seek to better understand the needs of journalists and become more responsive to them. Capacities should be built so that they can better fulfil their public information function. However, the ministries should not only communicate through their press offices. Ministers and operational staff should also be approachable directly and should actively seek to explain the substance of their work.

The NGO community may also wish to strengthen their media-related activities, actively advocating on the issues to which their work relates. Civil society, with its activities at the grass-roots level, is often very close to the human interest side of ageing which is especially interesting to the media. NGOs may use the personal angle of stories

⁴³ An NGO that provides assistance to Moldovan journalists and media, <http://www.ijc.md/eng/>

to transmit a more striking message about how to live together in a society where all generations have an opportunity to fulfil their potential. In addition, resident United Nations agencies could collaborate to develop a joint media strategy on ageing, each contributing its own perspectives. This may help to raise awareness within the general public as well as amongst public officials.

The overarching goal of media work relating to ageing and older persons should be to overcome the image of older persons as a group one should feel sorry for, instead highlighting their positive roles and thus creating an understanding that they are individuals with resources and potentials that could be capitalized upon for the overall development both of individuals and of society.

(b) Using the media to combat stereotypes

Whilst day-to-day media work is important, a well-designed and sustained media campaign could also serve to modify the prevailing perceptions of ageing which hinder open discussion of the topic and efforts to implement reforms. The issues that would need to be addressed in such a campaign are outlined briefly below.

Currently, intergenerational dialogue appears to be little more than a confrontation between young and old. In the workplace, older persons are seen as depriving younger generations of jobs. In reality it need not be a question of jobs going to one generation at the expense of another, but rather a matter of ensuring equal opportunities for all generations and an expansion of demand for labour overall. Age diversity in companies and organizations generally increases productivity when the contributions of all generations are actively sought and valued.

Often, the jobs sought by older persons are very different from those that younger people prefer. Providing income-generating opportunities to older persons also means that they can be more independent from reliance on transfers from their children and from the state. Possibilities for flexible working arrangements for older persons, such as shorter hours, may allow them to use the remaining time to help out with their children or grandchildren. A better understanding of these complexities in the wider society is needed, and a media campaign could contribute to this.

A media campaign may encourage broader discourse in society, exploring and explaining the potential consequences of population ageing and discussing possible responses. Such a campaign would enhance public understanding of the difficult decisions the government faces, and would hence facilitate discussion of the contributions that could be made by different elements of society. This enhanced public engagement would facilitate a participatory approach to the processes

of seeking and implementing sustainable solutions, and would ultimately enhance the public's sense of ownership of policy responses. A media campaign of this kind could focus on conveying the message that the earlier reforms are implemented, painful as they might be, the less difficult and expensive they will be in comparison to implementing them later as the demographic 'window of opportunity' begins to close.

A media campaign could be coordinated by the Ministry of Labour, Social Protection and Family or by a joint body such as the Commission on Population and Development. A public relations agency could be used to manage its implementation. The campaign could use various communications channels, including billboard posters, newspaper advertisements and articles, television talk shows and/or a website. Some of these communication channels would not reach people in rural areas, since Internet connectivity, for example, is largely limited to the capital. Therefore, special regional-level awareness-raising weeks could be planned in addition to the media outputs. Activities could involve workshops in schools or older peoples' homes to increase age-sensitivity and intergenerational understanding. The content of such activities would include informational events combined with social, cultural, educational and environmental activities. A campaign would need to be well designed in terms of the issues to be covered and the messages to be conveyed. The campaign should have a time frame, for example three years, and its design should include monitoring and evaluation mechanisms.

Such a media campaign could capitalize upon the experience gained previously from a campaign carried out by the Asociația agențiilor de publicitate din Moldova (AAPM, Moldova Association of Advertising Agencies). Each year this Association organizes a competition as a corporate social responsibility activity. A call for submissions on a specific topic of social importance is launched and the best poster is selected for distribution on large billboards as well as in print advertisements. The year 2007 was dedicated to the topic of ageing, with the motto "Ageing is not a sentence". In parallel with the poster campaign, staff members of the Association visited an older people's home and found that its inhabitants had very little opportunity to read books or newspapers. A collection was initiated and two truck loads of books were delivered to the home. Thanks to collaboration with the newspaper *Komsomolskaja Prawda*, social advertisements could be published at reduced rates (a high tax on advertising impedes more frequent use of social advertisements). The Association has expressed interest in working more closely with government, for example in designing additional activities in the area of ageing. They would be willing to contribute professional knowledge to engage the public in more in-depth discourse on ageing.

Recommendations

14. **Enhance media and press work undertaken by national and local government, NGOs and the United Nations agencies in Moldova. Professionalize communications targeted at news media.**
15. **Encourage journalists to follow good reporting practices on ageing and older persons: to widen their perspectives so that their stories relating to older people cover a greater variety of topics; to avoid the automatic labelling or separate categorization of older persons; and to take account of people of a variety of ages in news stories irrespective of the topic.**
16. **Develop monitoring of media reporting (for example, by commissioning academic studies) and publish the results of such exercises.**
17. **Launch a media campaign to broaden discourse in society surrounding the implications of ageing and potential solutions. Engage the public in an overarching discussion of potential solutions, thereby increasing public ownership of reforms.**

3. Stakeholder participation

RIS Commitment 2: To ensure full integration and participation of older persons in society

As ageing becomes an increasingly visible societal issue in Moldova, it is becoming the subject of active discussion among a wide range of stakeholders. These diverse actors can offer their expertise and help to broaden perspectives on priorities and directions for mainstreaming ageing. The Ministry of Labour, Social Protection and the Family would benefit from transparent dialogue between all those stakeholders with an interest in policy development and service provision relating to older persons in Moldova. The Government of Moldova has shown commitment to wide stakeholder consultation, for example in the process of developing the National strategic programme on demographic security for 2011-2025, which was opened for public consultation. There are differing but generally complementary priorities among the range of key actors. In order to build confidence in this national approach to mainstreaming ageing, and to ensure commitment to and ownership of resultant policies from all sectors, it is essential that the government seeks strategies that continue to appreciate and harmonize these priorities.

(a) Older persons as stakeholders in policymaking

Older persons must be full participants in the development process and must also be enabled to share in its benefits. Many older people are in good health and able to take care of themselves. They are also willing to provide help to their kin and to others, and to participate as active citizens. This opportunity and willingness must be supported, welcomed and capitalized upon.

As discussed above in relation to the integration of older persons in society, the older generation constitutes a

substantial voter base and therefore a significant political force. Inclusion of older persons in an open and honest dialogue on the design and implementation of policies and services that affect them will strengthen the ability of the Government to implement long-term, politically sustainable policies for an ageing society.

While welcoming and listening to the voices of older persons is clearly essential, the life-course approach as called for in MIPAA/RIS demands that all generations be given equal voice, not least because individuals pass through all the stages of life and the younger generations of today will be the older generations of the future. Enabling all age groups to participate fully in policy dialogue also reinforces efforts to strengthen a sense of solidarity and justice between the generations. Hence the full participation of all stakeholders must be taken to mean not only older persons but also youth and those in the middle generation.

(b) The private sector

The private sector has many roles to play both in devising and in implementing appropriate policies to mainstream ageing. A key function of the private sector in policy design is of course in research—collecting and analyzing the data needed for informed decision-making. Private sector research may be driven by different goals than public sector research – such as the need to understand target audiences for effective marketing of products and services – but the information produced can be equally valuable for informing policy design. Businesses, as employers, must also be involved as stakeholders in policy design regarding the length of working life and changes to labour market policies. As those closest to the employees themselves, employers can provide valuable input relating to changes in productivity and the needs of workers as they grow older. They must also be engaged if efforts to combat negative stereotypes and workplace discrimination are to succeed. Bringing businesses on board in developing strategies for improving lifelong

learning is essential as they will need to embrace these strategies if they are to be effective – it is therefore necessary to stress to private sector stakeholders that they could benefit from increased productivity of employees of all ages.

Roles of the private sector in implementation of strategies for mainstreaming ageing include supporting lifelong learning, both in and outside of the workplace; providing options for private health care, home-based care and institutional care; providing opportunities for non-state sources of retirement income; innovation in the design and delivery of products and services for older people, especially with devices and technologies for assisted living; providing suitable transport options for older persons where these are not provided by the state; and developing media, social and cultural activities which are either directly targeted towards older persons or which give them appropriate consideration and access.

(c) Non governmental organizations

Organizations of older persons are an important channel for enabling the participation of older persons in social life, both directly by bringing older people together, and through their advocacy work and promotion of intergenerational interactions. An active HelpAge International network of ten local NGOs working with and for older persons currently exists in Moldova, engaging mainly on issues of social and health service provision at the local level (a number of other, related NGOs remain inactive due to lack of funds). This network provides a strong bridge between statutory and community care for vulnerable people. The self-help group model developed by this network – based on older citizen volunteering – should be strengthened to encourage community support, especially in communities heavily affected by migration resulting in a high prevalence of ‘skipped generation’ households (that is, households in which the middle, parent generation is absent due to migration, leaving children and grandparents behind).

NGOs also serve a monitoring purpose, ensuring that policy failures or shortcomings in policy implementation come to light, and advocating for appropriate action. For example, NGOs working with older persons are likely to come into direct contact with those suffering from inadequate levels of social protection or those suffering from social exclusion. This function, a unique feature of civil society arising from the independence of NGOs, should be embraced and reinforced.

(d) Trade Unions

A quarter to one third of trade union members in Moldova are older than 50 years, and many union officials are aged 70 or older. Nevertheless, the main commitment of the unions at present is towards protecting the interests of younger workers, whom they

feel are disadvantaged in relation to older persons who receive pensions from the state. The argument that younger workers are the innovators and problem-solvers of the future is used to advocate for greater support for and training of youth. As stakeholders in the process of the design and implementation of policies on ageing, then, it is imperative that trade unions be brought on board to appreciate the necessity of intergenerational equity; to abandon the idea that prolonged workforce participation of older workers deprives the young of jobs; and to acknowledge the capacity for continued high productivity of older workers. To be politically successful and sustainable, age-friendly employment policies will have to be acceptable to the unions, and as such their voices will need to be heard; yet respondents reported that sometimes the concerns they raised with the Government were not taken up. Hence, inclusion of the unions as a legitimate partner in the process of participatory policy formulation is necessary.

(e) International organizations

Poverty eradication is a fundamental aim of the Millennium Development Goals (MDGs),⁴⁴ and as such is a central tenet of the development work of the United Nations agencies resident in Moldova.⁴⁵ Although attention in Moldova has recently been focused more explicitly on poverty eradication targets and policies, older persons still tend not to feature as a separate group in these policies and programmes. With the notable exception of UNFPA, ageing is not yet high on the agenda of the international organizations based in Moldova. Related issues are comprehensively considered by agencies; for example, the IOM works extensively in the issue of labour migration, and age differentials are of course highlighted.⁴⁶ Nevertheless, an explicit consideration of the situation of older persons – and especially of the social and cultural rather than economic elements of ageing – is yet to become a major theme.

Strengthening the role of the United Nations agencies and other international organizations in Moldova in ageing-related matters would be an important step in raising the general level of public awareness and understanding of these issues. Given the respect afforded to the United Nations, these institutions wield considerable power in this regard. The development and poverty-eradication mandates of the different organizations should also be capitalized upon where possible to help implement the goals identified in ageing policies.

The specialized agencies also possess specific technical knowledge, for example in the development and use of

⁴⁴ The eight goals for global development developed at the September 2000 Millennium Summit: United Nations (2000)

⁴⁵ For a full list of United Nations agencies resident in Moldova, see http://www.un.md/un_ag_mol/index_residents.html

⁴⁶ See, for example, IOM (2008), IOM (2009), etc.

gender- and age-specific poverty indicators, which could be used to help identify needs and monitor progress. An example of such collaboration is the survey on ageing undertaken with the assistance of the United Nations Department of Economic and Social Affairs (the latter being based at the United Nations Headquarters in New York, without a resident presence in Moldova); such initiatives should be encouraged wherever possible to make use of the knowledge, skills and financial support available.

(f) Academia

While opportunities for the academic study of demography are still limited in Moldova (see section below on research and data collection for more detail), academic and statistical institutions in Moldova have already been engaging closely with the government in collecting and analyzing information on population ageing. For example, such academic experts have been engaged in the preparation of the Green Paper⁴⁷ and the National strategic programme on demographic security for 2011-2025.⁴⁸

The National Bureau of Statistics, the Academy of Economic Studies of Moldova, and the Institute of European Integration and Political Sciences of Academy of Sciences as well as other academic bodies with suitable expertise, should remain key partners in the provision of technical information on population dynamics, helping to expand the knowledge base on population matters, including population ageing. A key role of academic bodies in the formulation of policies is ensuring that technical data and concepts are well understood by those who are not experts. In the realm of ageing this might include appreciation of the meaning of life expectancy figures (including the importance of using life expectancy at age 60 or 65 when talking about ageing, rather than life expectancy at birth); figures on the involvement of older persons in different sectors of the economy and social life; the role of fertility change in driving demographic ageing; and the limits to realistic and sustainable attempts to influence fertility.

Recommendations

- 18. Ensure that older persons' voices, as well as those of youth and the middle generations, are heard when devising policies which affect them.**
- 19. Increase and embrace channels for the private sector, civil society and trade unions to engage in policymaking, implementation, monitoring and evaluation.**
- 20. Engage resident United Nations agencies and other international organizations as stakeholders in matters related to ageing, for example where they interface with migration, poverty and development.**
- 21. Work with academia to ensure policies are based on accurate statistics and other information and their analysis, as well as a sound understanding of concepts.**

4. Sustainable economic growth and development

RIS Commitment 3: To promote equitable and sustainable economic growth in response to population ageing

(a) Poverty and inequality

In Moldova and other countries of the region, the benefits of economic growth are felt by only a relatively small proportion of the population, while vulnerable groups remain poor and opportunities for advancement are limited. The legacy of the Soviet-era centralized social distribution system, the fiscal constraints of the subsequent transition period, and more recently the

global economic crisis have conspired to prevent the poorest segments of society from escaping poverty.

From 2000 to 2008 Moldova experienced positive real GDP growth rates ranging from 2 to almost 8 per cent per year. Such growth has been accompanied by a sharp decline in poverty headcount ratio (from a peak of 73 per cent in 1999 to 29 per cent in 2010),⁴⁹ but at the same time, inequalities have increased along age, gender and education lines. While young, middle class, urban, well-educated Moldovans have benefited from a general increase in prosperity in the early years of the twenty-first century, rural and older citizens have not reaped the same benefits. The Moldovan authorities have reacted to this with reforms of the social protection and social

⁴⁷ Matei et al. (2009)

⁴⁸ National Commission for Population and Development (2011)

⁴⁹ The poverty headcount ratio is the percentage of the population living below the nationally-defined poverty line. This poverty line is determined by the National Bureau of Statistics each quarter according to data collected from the Household Budget Survey. UNECE (2011a).

assistance systems,⁵⁰ which have reduced or eliminated some of the errors in the previous system – but problems remain. In particular, the pensions system is still being reviewed and refined with the aim of providing for the poorest older Moldovans.

Structural and social developments have led a large proportion of the better-trained (and less poor) to leave the country to work abroad. While such emigration could be expected to raise poverty levels amongst those remaining in the country, through removing from the population a high proportion of those who are relatively better-off, the emigrants have in fact been responsible for decreasing poverty levels in Moldova by way of their remittances – albeit such remittances mostly benefit the urban middle classes. A direct effect of this is that rural and elderly Moldovans have the highest prevalence of poverty and social isolation, while the better-educated, middle class, urban Moldovans have enjoyed both remittances from abroad and relative and absolute salary growth in recent years.

As in other countries of the region, simple transfers are able to bring about an improvement in poverty incidence, but the breadth and social implications of the structural poverty problem cannot be tackled through targeted cash benefits for the very poor alone. As the Government already recognizes, a more general and substantial reform of both the pension system and the wider social protection system is necessary for poverty among older persons and other highly vulnerable groups to be reduced significantly and sustainably. Economic growth and social cohesion must go hand in hand in order for each to support the other. For the poverty of older persons to be addressed effectively, then, policies relating to the well-being of older persons must be integrated with social and fiscal planning and supported by international development aid.

(b) Economic crisis

With an average annual GDP growth of 6 per cent between 2004 and 2008 – reaching a peak of 7.8 per cent in 2008⁵¹ – the pre-crisis economic record of Moldova looked relatively positive. However, this economic growth was driven mainly by consumption of imported goods purchased using remittances from family members working abroad. The share of GDP coming from remittances was (and still is) among the highest in the world. As the international economic crisis took hold, however, many Moldovans working elsewhere in Europe lost their jobs and some were forced to return home: in the first quarter of 2009 around 13 per cent of migrants returned to Moldova, and during the first half of that year the value of remittances decreased by one third if compared with the same period of 2008.⁵² With jobs

already scarce, this return migration put added strain on the domestic labour market. Such developments, in combination with the slowdown of the economic growth rate (GDP declined by 6 per cent in 2009 but rebounded in 2010⁵³) could further worsen the levels of social equality and cohesion in Moldovan society. As the effects of the global economic crisis continue to be felt, debates about the availability and distribution of jobs and other economic opportunities, socially acceptable pension levels, and entitlements for returning migrants continue to stress the urban/rural, younger/older and skilled/unskilled divides. Targeted policies to cultivate social inclusion and cohesion are necessary to combat these divisive influences.

Overall, rural areas were worse affected than urban areas by the economic crisis. Rural households are especially dependent on remittances, which on average represent around 25 per cent of their total income.⁵⁴ Although in absolute terms the main benefit of remittances is felt by middle class urban Moldovans, in relative terms their importance is greatest for rural dwellers whose total non-remittance income tends to be smaller. With many older persons being rural residents and heavily reliant on remittances, they have suffered disproportionately.

(c) Mitigation strategies

Although the GDP figures for 2010 indicate that Moldova is gradually recovering from the effects of the crisis, the increase in poverty and inequality that it created will take time to resolve. Several strategic documents have been developed by the Government in an attempt to streamline and better coordinate the response to the crisis, including the Economic Stabilization and Recovery Program 2009-2011⁵⁵ and 'Rethink Moldova',⁵⁶

The former aims to prioritize public spending and cut back on its least efficient elements; to improve social protection measures for vulnerable households; and to assist businesses to survive the impacts of recession. It is not meant to replace existing strategy documents guiding policymaking, but rather is to be understood as an instrument to reach existing goals.

The implementation of these reforms presents an opportunity to take into account generational justice and the specific needs of older persons from the outset. For example, some of the actions envisaged to facilitate entrepreneurship – establishing administrative 'one stop shop' solutions, easing the administrative burden for start-ups, and facilitating access to funds – would benefit older persons who seek to establish their own businesses. The potential benefits for older persons of reforms aimed at improving the climate for entrepreneurs could more systematically be explored. The Economic Stabilization

⁵⁰ See following section on social protection

⁵¹ UNECE (2011a)

⁵² Expert Group (2009) p.10.

⁵³ UNECE (2011a)

⁵⁴ Otter (2009)

⁵⁵ Government of Moldova (2009)

⁵⁶ Government of Moldova (2010)

and Recovery Program 2009-2011 emphasizes the importance of the two-component pension system (consisting of a basic pension and an insured pension) for ensuring fair and efficient social protection for persons of pensionable age. Generally, a more integrated social protection system is called for. The needs of returning migrants and youth are considered, especially concerning work opportunities. The special social and economic needs of older persons, including the potential impacts on social protection for those with a history of participation in the informal rather than formal labour market, are not specifically addressed – and given the extent and nature of ageing in the country it would seem advisable to make additional efforts in this area.

‘Rethink Moldova’ is the vision of the Government for achieving a five-pillar set of reform priorities: European integration, economic recovery, rule of law, administrative and fiscal decentralization and reunification of the country. The document calls for the stimulation of economic growth to fight poverty and to promote human development in a non-discriminatory way. It explicitly mentions that employment opportunities should be open to all regardless of region, race, gender or disability status, but does not refer to age as an area in which such discrimination should be avoided. Proscription of discrimination on the basis of age should be included in central strategy documents such as this one to ensure

that older persons are given due consideration in poverty reduction and crisis management plans.

As in the Stabilization and Recovery Program, ‘Rethink Moldova’ details measures for supporting small to medium enterprises and facilitating entrepreneurship: but again, the relevance of this to older persons is not specifically highlighted. Measures for concessional lending for youth and women are called for, but such measures do not extend to older persons, even though older persons who aspire to self-employment face equal or indeed greater difficulties in accessing funding—with institutionalized discrimination in the form of age limits for start-up and lending schemes combining with less explicit ageism to make such access especially challenging for older persons.

Special efforts are called for in infrastructure development, especially to improve road infrastructure, energy infrastructure and reformulation of the heating sector. These improvements are of course necessary ideals, but it is worth noting that they are expensive and therefore require major long-term planning. Ensuring access to safe water supplies, sewerage systems and sanitation facilities is considered a top priority, given the direct impact of the deficiencies in these facilities on the public health status of the population. The particular health vulnerabilities of older persons mean that progress in these areas is particularly pertinent to them.

Recommendations

- 22. Ensure follow-through of planned pension reforms and reform of the social assistance system to ensure basic income security for all older people.**
- 23. Ensure that needs of older persons raised in this Road Map and in the National Strategic Programme on Demographic Security for 2011-2025 are taken into account and integrated into fiscal and economic policy, and are considered in future government strategy documents, including crisis management plans and structural reforms.**
- 24. Include specific consideration of the effects on older people when assessing the impacts of the economic crisis on vulnerable groups.**

5. Social protection

RIS Commitment 4: To adjust social protection systems in response to demographic changes and their social and economic consequences

Social protection mechanisms are intended to protect people from the difficulties associated with insufficient incomes or sudden drops in income, from the need to make large financial outlays (e.g. in case of illness) and from lack of or insufficient access to services. These are

all risks that are particularly salient for older persons in Moldova. Population ageing necessitates careful adjustment of social protection systems, especially where they have evolved under earlier demographic regimes in which the needs of young families were predominant and therefore took priority.

Prior to 1998 the Moldovan social protection system was similar to the Soviet model.⁵⁷ Several institutional

⁵⁷ In which there was no social assistance element since there were deemed to be no specifically vulnerable groups in need of special assistance; pensions were not contribution-based; and pension systems were often insufficiently financed generating large pension debts [Cruc et al (2009) p.53]

reforms have taken place since 1998,⁵⁸ but the system remains complex and fragmented. The pension reform process, in particular, stalled in 2003 and has only recently begun to regain momentum, with projections of further population ageing and long-term deficits driving a renewed commitment from the Government. Ongoing difficulties include a lack of resources for implementation, and the fiscal centralization which has a tendency to undermine the capacities of local authorities.

(a) Institutional framework for social protection

Following the various reforms since 1998, the system can now be broadly divided into two parts: that of social insurance, in which income-based contributions are paid with the expectation of eventual benefits, according to the principle of solidarity between generations; and that of social assistance, in which cash transfers are given on a non-contributory, means-tested basis to vulnerable persons.⁵⁹ The social protection system, including the development, coordination and implementation of social protection policies, is the responsibility of the Ministry of Labour, Social Protection and Family. The National Social Insurance House is in charge of recording and distributing funds generated by the state social insurance contributions paid by employers and employees.

The social insurance system covers employed citizens, agricultural workers, and certain categories of self-employed persons. Social insurance contributions are taken at a rate of 6 per cent from monthly earnings, up to a maximum of five times the current national average monthly wage. Employers pay contributions at a rate of 22-23 per cent of the payroll. The contributions are used to finance pensions, sickness and disability benefits and allowances for the unemployed and for families with children.⁶⁰

In addition to this social insurance scheme, the social assistance system contains a number of different benefits, many of which are not granted on a means-tested basis but are given to specific categories of persons (such as those who have participated in military service, disabled persons, families with five or more young children, and those who suffered as a result of the Chernobyl accident). This lack of means testing results in a significant proportion of these targeted compensations being received by non-poor recipients. A further problem is that the system is apparently very complex, with a wide variety of different benefits and beneficiary groups. Simplification of the system might improve both

transparency and efficiency, and would contribute to the positive perception of the system by citizens.

(b) Pensions

The social insurance pension for older persons in Moldova is a defined-benefit pension scheme with a relatively early retirement age (57 years for women and 62 years for men). Life expectancy at birth is currently 73.48 years for females and 66.15 years for males,⁶¹ and this leads to a common argument that there is only a short period of post-retirement life expectancy, especially for men, so that raising the retirement age would be unfair. Comparing retirement age with life expectancy at birth, however, can be misleading in a context where total life expectancy is heavily shaped by relatively high infant and child mortality. A more meaningful perspective is gained from comparing the pensionable age with the figures for life expectancy at that same age, or, to give a figure that is comparable across men and women and across countries, life expectancy at age 65 (that is, the number of additional years of life to be expected by someone who has already survived to the age of 65). This latter measure is 14.98 years for women and 12.01 years for men,⁶² leaving women with more expected years of additional life than their male counterparts, combined with fewer working years during which to accumulate pension credits, since their retirement age is earlier. Gender differentials in life-course paths and gendered discrimination patterns throughout their lives also mean that women are often in a situation where they have worked fewer years and with lower salaries than men. This results in older women receiving smaller pensions and having a significantly higher risk of living in poverty. In terms of income, by far the poorest population segment in Moldova is women over the age of 70; 41 per cent of them live in poverty.⁶³

The size of the social insurance pension is very small; the minimum monthly pension is 641 lei (54.81 US dollars), or 570.66 lei (48.80 US dollars) for agricultural workers. The size of benefits is related to the number of years of contributions and the average monthly earnings during that time. The social assistance pension (known also as the 'social pension'), for those who do not qualify for the social insurance pension, is a mere 89.71 lei per month (7.64 US dollars).⁶⁴ A number of so-called 'privileged categories' enjoy larger pensions.⁶⁵

The pension reform aims to gradually increase pension entry age (as well as unifying the entry age for men and women) and to introduce a defined contribution format

⁵⁸ e.g. Laws: 156-XIV (14 October 1998); 489-XIV (8 July 1999); 547-XV (25 December 2003); Government Decisions: 141 (23 September 1998) & 416 (28 May 1999)

⁵⁹ Cruc et al. (2009)

⁶⁰ Social Security Administration (2010) p.211

⁶¹ United Nations Population Division (2011).

⁶² Ibid.

⁶³ Cruc et al. (2009)

⁶⁴ Social Security Administration (2010) p.212

⁶⁵ In 2011 the reform of pension system about privileged categories has started.

within a move towards the multi-pillar scheme promoted by the World Bank. A particular challenge for the reform will be ensuring adequate coverage of vulnerable groups: those working in the dramatically-expanded informal sector, low-income workers, migrants and returned migrants, and especially women who have accumulated pension entitlements over fewer working years due to care responsibilities at home.

(c) Other cash transfer programmes

The Ministry of Labour, Social Protection and Family following adoption of a law on means-tested social benefits in October 2008,⁶⁶ aims at targeting the poorest members of society to ensure a minimum monthly guaranteed income to the most vulnerable families. A household is eligible if the total household income is below the state's monthly minimum guaranteed income level⁶⁷ and if, at the same time, all adults in the family fall under at least one of the following categories:

- have reached pensionable age,
- belong to a group with a defined disability,
- are unemployed and registered as such by the territorial employment agency,
- care for a child aged less than 3 years,
- care for a child or children, or a person or persons with disability, or care for an older person aged over 75 years.

(d) In-kind transfers

Much of Moldova's social protection system consists of in-kind transfers, i.e. non-cash benefits such as goods and services. Many of the numerous components of this system affect older persons.⁶⁸ One example is social canteens which provide free hot meals for those in need, for up to 30 days per quarter (there were 129 such canteens in 2010, benefiting around 5,900 people). Home care services, such as household maintenance and adaptation, personal hygiene assistance, grocery shopping and socio-cultural support are provided on request and following a needs assessment; in 2010 such services were rendered to some 25,400 people, many of them older persons who live alone. The Annual Social Report 2010 details a wide range of other in-kind forms of social protection provided to older persons, ranging from several day care centres and temporary shelters to seven specialized 'socio-medical rehabilitation' centres,

⁶⁶ Government Decision no. 1167 (16 October 2008)

⁶⁷ An amount set annually by the Government. The size of the transfer is calculated according to a method laid out in articles 18 and 19 of Government Decision no. 1167 (16.10.2008), based on the number and status of household members and the difference between their total income and the minimum guaranteed income.

⁶⁸ MLSPF (2011)

which in 2010 benefited 463 beneficiaries.

Reducing older people's expenditure on health by ensuring their receipt of free or subsidized services and medication is of course as effective in reducing poverty as income supplementation. Age discrimination within health care provision (for example, ambulances not responding to calls by older people, or doctors prioritizing resources and time for younger generations) can be overcome with committed efforts to monitor service delivery and through proactive provision of information on eligibility criteria for existing programmes. Civil society can play a role in monitoring of statutory services and ensuring that older persons have up-to-date information about available services and entitlements, such as financial assistance in paying for utilities, transport or medicines. For example, the method of Older Citizen Monitoring⁶⁹ that relies on trained older persons for observing and recording access to health care by older women and men has already been applied in ten regions of Moldova since 2007.

(e) Improving the social protection of older persons

The Government has recognized that the social protection system, and in particular the pension system, must be overhauled to make it equitable, sustainable and realistic in the face of population ageing and return migration. A gradual transition from the solidarity pension system to mixed and subsequently to funded retirement plans is envisaged. It has been proposed that a draft law on optional pension funds should be developed. Such a law would be intended to relieve the stress on state social funds, safeguard future payments for retirees, and provide opportunities to develop additional tools for the social protection of older persons.

Promoting public understanding of pension systems through financial literacy schemes and awareness-raising campaigns is important for ensuring public appreciation both of the need for reforms, and of the ways in which these reforms will affect individuals. People often view retirement and an associated pension income as an entitlement; hence transparency about the rationale of the reforms will be necessary to ensure that people understand clearly how the reforms will affect them personally. In particular, those with low incomes, those working in the informal sector, or others with small or non-existent contribution histories must be made aware of the differences between the social pension and the contributions-based pension and the extent to which they will benefit from either or both of these when they reach

⁶⁹ For more details about Older Citizens' Monitoring, see <http://helppage.bluefountain.com/Researchandpolicy/MadridInternationalPlanofActiononAgeing/Citizenmonitoring>

retirement age. In concert with such awareness-raising, younger people should be empowered to develop saving strategies throughout their lives to decrease dependence on public services. For those in need and their family members, information about available services and eligibility criteria for entitlements should be made easily accessible.

The social protection system will need to take into account the increased size of the informal labour market over the past 20 years. As discussed in the section on migration, once returned migrants and informal workers, lacking records of any formal employment history, reach pensionable age, a safety-net mechanism will need to operate to guarantee a minimum non-contributory pension income in their old age that is sufficient to avoid widespread poverty: the current size of the social pension, as noted above, is less than 90 lei per month which is far too small to serve such a purpose.

Extending working lives to relieve the pressure on the financing of the pension system will be an especially significant challenge. Workers may be reluctant to work longer and employers may be averse to employing older workers, unless policies are put in place to create enabling environments for them to stay in the labour market, at the same time providing clear incentives for employers to retain their older workers. Public awareness-raising to counteract the 'lump of labour'⁷⁰ fallacy will be required to reduce the tendency to retire early in order to 'make room' for younger workers.

In a similar vein, social cohesion and stability depends upon a general perception of the social protection system as being fair. If any age or occupational group is unfairly privileged or disadvantaged, or even perceived as being so, the system will be vulnerable. Hence any reforms must be accompanied by research to evaluate public opinion, as well as information dissemination to ensure that changes are understood. This is true, for example, for changes in retirement age and rules surrounding pensions for those still active in the labour market.

Recommendations

25. **Adjust social assistance to ensure a liveable minimum income for older persons with no other means of support, in particular those living alone or those caring for dependents; adjust social insurance system to complement this with fair and adequate benefits commensurate with contributions.**
26. **Reduce the complexity of qualifying conditions and of benefits and entitlements, especially where special categories of recipients receive non-means-tested benefits; make clear information available on eligibility criteria for all existing social benefits and entitlements.**
27. **Engage civil society, including older persons themselves, in the monitoring of service delivery.**
28. **Introduce information campaigns to increase financial literacy and understanding of the pension scheme, especially when reforms are being considered and implemented.**
29. **Encourage younger people to begin saving from an early age.**
30. **Take steps to ensure that non-contributory social protection systems cover, to the greatest extent possible, workers in the informal sector including migrants, who have not been able to contribute through the social insurance scheme.**
31. **Monitor public opinion regarding the perceived justice or otherwise in the social protection system.**

6. Labour Market

RIS Commitment 5: To enable labour markets to respond to the economic and social consequences of population ageing

(a) Older workers in the labour market

In Moldova, as in many countries, both difficulties in accessing the labour market and the risk of losing one's employment rise with advancing age. At the same time,

the financial needs of older persons may increase as they age, for example due to deteriorating health status. As detailed above in the section on social protection, most retirees in Moldova need supplementary retirement income in addition to the state pension, regardless of their place of residence or former field of economic activity, since pensions do not cover all expenses required to maintain an adequate basic standard of living, even amongst those who qualify for the full pension, and certainly not amongst those receiving only the social

⁷⁰ See earlier section on integration of older persons

pension. Therefore the risk of poverty after reaching retirement age is extremely high, especially for those with little or no contribution history which is particularly likely for women. As such many people find it necessary to continue working beyond the retirement age. While this is fully permitted by the law,⁷¹ in practice it is often difficult as older workers find that they face explicit or unintended ageism.

The rate of employment of persons in the pre-retirement and retirement-age groups is, like that of all age groups, rather low, fuelled by a general lack of employment opportunities throughout the labour market. In recent years there has been a constant decline in the share of people aged 45 years or older amongst all those who are employed, even as the relative size of this population group has continued to grow. The main area of employment for people in these age groups is agriculture, in which the jobs are usually poorly paid and often informal. Fostering the conditions for greater access of older people to employment in the formal sector would help to ensure that such workers benefit from health and safety legislation and other labour protection measures.

Given the difficulty of finding employment after age 45, people in the pre-retirement age groups may face a future of long-term unemployment. Since the period between age 45 and the state retirement age⁷² is currently 12 years for women and 18 years for men, unemployment or underemployment during this period has a considerable bearing on the length of service and size of contributions used to determine pension entitlements. As such, discriminatory employment practices make many of those in the pre-retirement ages vulnerable to the risk of poverty in the future.

Such discriminatory practices include the preferential hiring of younger people and people with higher levels of education when this is not specifically justified by the requirements of the job. There is a preconceived notion among many employers that younger people are in better health, are more efficient, have superior technological skills and are better trained in the substantive areas of their professions than their older counterparts. Those opinions, however, are not necessarily justified, and they overlook the benefits of accumulated experience and professionalism of older employees, and the possibilities they present for passing on knowledge and skills to younger generations. Employers should be made aware of the potential benefits of employing people from a diversity of age groups.

⁷¹ The Labour Code does not permit any discriminatory provisions relating to older persons, and the National Employment Strategy explicitly demands compliance with the Code and eradication of ageism. [Labour code, law no. 154-XV (28 March 2003) & Ministry of Economy & Trade (2007).]

⁷² The state retirement age is 57 for women and 62 for men.

(b) Access to the labour market

Any strategy for increasing employment opportunities for older workers requires the comprehensive support of public authorities, employers and trade unions. Whether through legislation, incentives or voluntary action, employers should be encouraged to adjust working conditions so that older workers can continue at their previous level of productivity, by making small changes to the work environment (lighting, temperature, sound conditions, workspace equipment etc.); by providing flexible working arrangements to allow for reduced or non-standard hours and home-working; and by the use of new technologies to facilitate ‘telecommuting’ or other flexible forms of employment.

To enable them to counteract discriminatory tendencies in the employment of older workers, job seekers of pre-retirement age and beyond must have access to sufficient information on opportunities and on their employment rights. Centres could be developed – with the cooperation of the National Employment Agency, for example – as hubs for a network of social services for older workers in the labour market, including sources of information on jobs, and social and psychological assistance. This would require innovative, cross-disciplinary collaboration and agencies thinking beyond the usual boundaries of their own field of responsibility.

Integration of older workers into the labour market also requires raising awareness amongst employers of the benefits of hiring people of all ages, including older people and those in the pre-retirement ages. Incentives for the establishment of positions suited to older workers are necessary, but this should not come at the expense of younger employees.

(c) Employability of older workers

The main obstacles to the employment of those aged 45 and above are their often lower level of education and a lack of entrepreneurial skills. Hence, as well as ensuring that jobs are available which are suitable for potential employees, it is important to consider the opposite angle, namely to ensure that older employees are suitable for the available jobs. This can be achieved through training and retraining,⁷³ improving continuing professional education, and facilitating the conditions for older workers to transfer their skills to younger counterparts.⁷⁴

⁷³ According to Moldovan labour legislation, an enterprise should allocate not less than 2 per cent of the enterprise’s wage payments fund for the purposes of personnel training and retraining. However, this is rarely put into practice, particularly for people older than 45 years. [Labour code, law no. 154-XV (28 March 2003) Article 213(3)]

⁷⁴ Continuous learning is discussed in more detail in the section on education.

The responsibility for retraining and continuous learning lies not only with employers but also with workers themselves. Encouraging those who face difficulties in finding full employment to consider retraining in a new field would be one means of raising their chances of employment in a changing labour market. Older workers would be more willing to consider a career change under a social protection system that safeguarded them during the period of retraining.

Promoting the development of entrepreneurial skills amongst older people, and facilitating the efforts of such entrepreneurs, will increase their chances of remaining economically active. Tax credits for older people establishing businesses, simplified processes for business registration and administration, and improved transparency could all contribute to this. Specific programmes to facilitate entrepreneurship amongst older women and rural dwellers would help to reduce the particular barriers faced by these groups.

Recommendations

- 32. Take measures to combat explicit ageism amongst employers, other workers and trade unions.**
- 33. Increase opportunities for flexible working arrangements and changes to work environments, as well as improved curricula for lifelong learning and training, to facilitate the continued productivity of older workers.**
- 34. Enhance the availability of information on employment opportunities, career counselling, and employment rights for people who are unemployed and those looking to change career, including older persons.**
- 35. Streamline and improve transparency in business registration and administration, and consider providing tax credits to older people establishing businesses.**

7. Migration/returning migrants

RIS Commitment 5: To enable labour markets to respond to the economic and social consequences of population ageing

Demographic ageing is not unique to Moldova—it is a widespread phenomenon across the UNECE region and much of the world, following inevitably from the long-term changes known as the demographic transition. In Moldova, however, large-scale net out-migration significantly exacerbates the pace and scale of ageing, reducing the absolute number and relative proportion of people in the main working ages much more rapidly than would be the case from fertility and mortality decline alone. The extent and the often undocumented nature of emigration from Moldova may have a range of negative impacts on the state, on the stability of social funds, and on migrants' individual savings and entitlements. Long-term separation of 'middle-generation' migrants from their families often leads to family breakdown and can have detrimental effects on intergenerational relationships and the well-being of older persons.

(a) The nature of migratory flows

Migration has been an important feature of population dynamics in Moldova since the onset of the post-Soviet transition. A much higher share of the economically

active population is involved in migration in Moldova than in the other ageing countries of the region, such as Belarus, Ukraine or Romania. According to official statistics,⁷⁵ the number of people aged 15 years or older working or looking for work abroad increased over the period 2000-2010 from 138,300 to 311,000. However, data from other sources including sample surveys⁷⁶ suggest that these numbers may be far from accurate and the true figure may be very much higher, perhaps as many as 600,000 people. Motivations for migration are often characterised as 'push factors' and 'pull factors'. Among the 'push factors' in the Moldovan case are the economic crisis and inflation, reduced availability of jobs in agriculture, high unemployment and low wages. 'Pull factors' include better employment opportunities and higher salaries abroad.

The demographic profile of those involved in migration flows reflects the structural problems of the labour market in Moldova, such as the lack of jobs in rural areas, high youth unemployment, and difficulties faced by women in finding employment. Hence more than two-thirds of migrants come from rural areas, and the rate of migration of Moldovan women is high and continues to rise. The share of women amongst the total number of migrants increased from 30-32 per cent in the early years of the last decade, fluctuating but overall

⁷⁵ National Bureau of Statistics (2010b)

⁷⁶ Pantiru, Black & Sabates-Wheeler (2007) pp.8-9.

gradually rising to 36 per cent in 2010.⁷⁷ The proportion of migrants with higher education has increased rapidly over the past decade, from 7.7 per cent in 2000 to 10.7 per cent in 2010.⁷⁸ Most of the migration out of Moldova is undertaken by those in the younger age groups: those aged 15-24 years account for 22 per cent of the entire migration flow, while one-fifth of the total population in this age group are emigrants. The share of migrants in the adjacent age groups is likewise high.

Rapid adaptation and social integration in the host countries is typical of young migrants, and as a consequence it is common that even if they begin with the intention of migrating only temporarily, they then alter their plans and become permanent emigrants, resulting in the loss of a part of Moldova's future labour force (and, in view of the often higher educational level and the degree of motivation and energy of those driven to migrate, the loss may be even greater than would appear by considering numbers alone; that is, migrants include amongst them many of those with the greatest productive and innovative potential. This is the so-called 'brain drain' in action). Such permanent emigration adds to the declining share of youth in the labour force, already underway due to internal demographic change, and reduces the flexibility of Moldova's economic system, adding to the challenges of continued development and modernization. Without measures to foster working environments conducive to increased productivity for older workers, the slowdown in innovation resulting from such a change in the balance of youth and older workers may bring about a reduction in per capita output, and a decrease in real wages, investment and demand.

Although the younger population predominates in migration flows out of Moldova, an increasing trend of emigration of people in the pre-retirement ages has become evident. The number of labour migrants aged 50-54 years has increased by more than seven times over the past ten years, whilst those in the age group of 55-59 year-olds (a group which has only been considered separately in the migration records since 2002) increased by more than four times between 2002 and 2009.⁷⁹ As well as suggesting an appreciation of their experience and skills in the countries to which they migrate, this may indicate a limited capacity of the national labour market to provide adequate employment for people in these age groups, and it points to the need to reform the labour market, taking into consideration both the migration process and the overall ageing of Moldova's population.

(b) Impacts of migration

Despite the positive effects of migration, such as the large influx of remittances from the migrants and the potential

to reduce pressure on the national labour market at a time when jobs are scarce, the scale of migration out of Moldova has an overall negative impact on the country's economic, social and demographic development in the long term.

While the migration of younger people has major consequences for the national economy, the impacts of migration of people in the pre-retirement ages are more acutely felt by the migrants themselves. This is because the period between ages 45 and retirement age represents the period of greatest income-earning potential, and it is this which underlies the accrual of pension entitlements through income-based contributions. For most of those who migrate during this period of their lives there is no legal recognition of their earnings while abroad, nor any facility to transfer accrued pension contributions from the host country, and consequently their work during this period will remain beyond the social insurance pension scheme in the future, if and when they return to Moldova.

The unfavourable conditions for unskilled labour – psychological stress and very long working hours – raise the risk of various health effects for migrants, and especially female migrants. During a survey every third migrant woman indicated that her health had deteriorated as compared with her state of health before migration, while men reported a worsening of their health in a quarter of cases.⁸⁰ Migrants' access to health care is often difficult as they may lack health insurance, or may be unable or unwilling to seek the help of doctors due to their undocumented status, restrictions on leaving the workplace, or their remote location in rural areas. The health effects of undocumented or unregulated migration thus on Moldovan migrants could in turn have consequences for the future of Moldova's workforce, as well as on the demands placed on its health and social welfare systems by older returned migrants with diminished health status.

Migration has mixed effects on the economy of Moldova. On the one hand, migrants' remittances are a very significant source of income. In 2007 they amounted to 34.1 per cent of total GDP.⁸¹ A large proportion of remittances is probably transferred informally without using the banking sector, so that the actual quantity of transfers may be larger than this. While an over-reliance on remittances presents risks (especially in times of economic crisis at home and abroad), remittances can contribute to economic growth by fuelling an increase in household consumption. For many families remittances constitute the main source of income. Surveys conducted in recent years⁸² revealed that the money earned by

⁷⁷ National Bureau of Statistics (2010b)

⁷⁸ Ibid.

⁷⁹ Ibid.

⁸⁰ Ministry of Health (2010)

⁸¹ UNDESA (2009)

⁸² CIVIS & IASCI (2010)

migrants abroad is usually spent primarily on consumer needs and is distributed among the family members remaining at home and unable to work (children, parents). Although this has to some extent helped reduce poverty, the small size of the migrants' wages prevents them from accruing savings for use in their own old age.

On the other hand, labour migration results in a reduction in the financial flows to Moldova's social security fund. Under the existing solidarity-based pension system,⁸³ migration of people in the working ages reduces the amount of money that is collected to pay out pensions and other social payments, placing a strain on the system; increases the tax burden on the economically active population remaining in the country; leads to a disconnect between a person's labour contribution and the amount of pension they eventually receive, thereby reducing incentives for the payment of contributions to social funds; and most importantly deprives migrants of the right to their own social welfare benefits in their old age.

(c) Addressing the challenges of migration in relation to older persons

The diversity of destination countries of migrant workers – about 60 per cent go to the Russian Federation and nearly 40 per cent to the EU countries, particularly Italy – and the differences inherent in the social and migration policies of those countries complicates considerably the processes of negotiation between Moldova and the receiving countries. Such negotiations are necessary to reach bilateral agreements on return migration and the development of a unified approach to the issues of mutual recognition of records of service, the period of accrual of insurance contributions, and the opportunity for transferring accrued insurance payments to Moldova when a migrant returns home.

The Government has developed a tool to safeguard the social (including pension) rights of Moldovan migrants, by transferring social insurance contributions to the National Social Insurance House for every year of a migrant's stay abroad. Moreover, the migrants are given an opportunity to transfer those contributions retrospectively to cover a preceding period of up to ten years. However, the number of migrants who have actually paid such contributions is extremely small compared with the actual number of migrant workers and makes up only around 300 people a year on average. This mechanism, of course, also only applies to legal, documented migrants.

A variety of measures on many different fronts is necessary to mitigate the adverse economic effects of

labour migration and help Moldova to implement the planned changes to the pension system.⁸⁴ One such measure is to address the issue of possible visa-free entry of Moldovan citizens to the countries of the EU, and a relaxation of regulations concerning their employment in these countries. This would ease the problems of illegal movement and employment of migrants, at least in part. Providing channels for legal migration and employment would ensure migrants' social protection in the host country and at home, and this in turn would facilitate return migration and ease some of the challenges of providing pensions to older persons in Moldova.

A necessary step in addressing the problems caused by migration is better analysis of current numbers and forecasts of future migratory flows. Studies are needed to determine Moldova's migration potential (people intending to leave) as well as the estimated number of migrants who are likely return home. International figures suggest that up to 50 per cent of migrants become assimilated into their host countries and remain there permanently. This process has not yet been studied in the specific case of Moldova. Currently a number of different government institutions deal with the registration and organization of migration in Moldova. These include the Ministry of Interior, the Ministry of Foreign Affairs and European Integration, the Ministry of Technologies and Communications, the Frontier Guard Service.⁸⁵ Close coordination and sharing of information between these agencies would aid the development of such forecasts.

Information provision for migrants should be strengthened, by providing up-to-date online information for those who intend to leave as well as those considering returning. Information service centres, websites or hotlines may be useful tools (although the limited access of people in rural areas to such resources must be borne in mind). Clear and freely-available information on migrants' rights, particularly of those around retirement age, may help to protect Moldovan migrants both from deliberate abuse and from inadvertently missing out on entitlements due to lack of knowledge, e.g. about opportunities for building up pension contributions from overseas. Wider dissemination of such information may also help to increase the share of migration taking place through formal channels.

(d) Returning migrants

Many migrants have returned to Moldova after losing their jobs abroad as a result of the economic crisis.⁸⁶ This, combined with the general view that it is desirable to encourage the return of young, highly-skilled emigrants, means that strategies must be developed in order to

⁸³ 'Solidarity' refers to an unfunded pension scheme, i.e. one in which the contributions of current workers are used to pay the pensions of current pensioners rather than being set aside as investments for future pensions.

⁸⁴ Outlined in the section on social protection

⁸⁵ National Commission for Population and Development (2011)

⁸⁶ See section on sustainable economic growth and development

ensure that employment opportunities are available to them when they return. This is especially important for rural areas to avoid high unemployment. Particular attention should be paid to those fields and occupations in which the migrants can apply expertise gained during their time abroad (whether in studies or employment). Strengthening the interactions between Government authorities and businesses to better capitalize upon returning migrants' new skills should be a key part of this endeavour.

In this regard, a new pilot programme has recently been introduced⁸⁷ to encourage the return of those Moldovans who have studied abroad, by helping to identify employers, providing administrative assistance, covering transport costs, and providing a living allowance during the period of job search for up to six months. This collaboration between the National Employment Agency, the Ministries of Youth and Sports and of Education, and the IOM, opened for its first round of applications in spring 2011 and will benefit 30 graduates. A full analysis of the effectiveness of this pilot programme in preventing permanent emigration and the 'brain drain' effect will be necessary to determine whether and how to roll it out more broadly.

Opportunities should also be created for returning migrants to integrate into business activities in Moldova; for example by encouraging and facilitating the establishment of small and medium-sized businesses; by providing accessible loans and grants for the creation of new jobs or the introduction of high-tech systems; by simplifying the registration procedures for new businesses, and perhaps by changing tax rates. All measures that ease the rapid integration of returned migrants into the labour market will help to bolster the financing of the social protection system, both supporting current pension recipients and safeguarding the future pension coverage of the returned migrants themselves.

(e) Regulating migratory flows

One strategy in reducing the negative impacts of large-scale migration is to increase the cooperation of authorities and businesses, both in Moldova and in receiving countries, to diminish the numbers of illegal migrants. This alone will not be effective, however, without far greater attention to the social and economic factors that motivate people to migrate. With respect to older persons, for example, greater inclusion of people in the pre-retirement ages in the labour market would reduce incentives for them to emigrate to find work at this stage of life, while at the same time enabling their continued contribution to the domestic labour market.

Regulation of migration processes on the level of bilateral agreements with the countries receiving migrants largely depends on the attitude adopted by the host countries. The demands of the labour markets of the host countries, and the employment of most migrants in the informal sector or in activities such as domestic work have driven the migrants out of the reach of the legal framework and deprived them of opportunities for social protection both in the host country and upon their return to Moldova. Agreements on labour migration and contracts for the social protection of migrants made with a number of European countries⁸⁸ are positive developments; however, the guarantees of social protection they provide will not act retrospectively, i.e. those who migrated prior to the agreements will receive no credit for periods worked in host countries prior to the agreements.

(f) Non-economic impacts of migration on older persons

In addition to the economic impacts discussed above, the scale of migration in Moldova has social and psychological effects on the older persons whose younger family members have gone abroad, especially if they are left caring for their grandchildren.⁸⁹ Assistance should be provided – whether by social workers, NGOs or other agencies – to those suffering from feelings of loneliness and isolation following the emigration of their offspring or other family members, as well as those left with care duties in 'skipped generation' households.

Recommendations

- 36. Step up negotiations with the EU and the Russian Federation to reach agreements on labour migration and on the international transfer of social protection accruals and benefits for migrants and returning migrants.**
- 37. Continue to engage in discussions with the EU to devise ways of reducing the undocumented nature of Moldovan migration to, and employment in EU countries.**

⁸⁷ IOM Moldova (2011)

⁸⁸ For details see IOM (2008b) pp. 17-20

⁸⁹ See, for example, the section on intergenerational solidarity

Recommendations

38. Improve systems for estimating current migratory flows and projecting future flows, including likely numbers of returning migrants; improve systems of registration of current migrants' foreign and domestic social security contributions.
39. Improve access to information about current and future social protection rights of migrants; through improved information dissemination, encourage voluntary payments to pension schemes, including for undocumented migrants.
40. While recognizing the positive aspects of temporary migration for work or study in terms of knowledge, skills or funds gained, encourage migrants to return to Moldova and invest these assets in the development of their home country.
41. Improve the incentives for migrants to return, including improved job opportunities for returning migrants and incentives for creating small and medium-sized businesses.
42. Improve capacities of social workers and/or NGOs to assist older persons left behind by migrants, not only in practical but also in emotional terms.

8. Education and lifelong learning

RIS Commitment 6: To promote lifelong learning and adapt the educational system in order to meet the changing economic, social and demographic condition

(a) The Moldovan general education system⁹⁰

Education in Moldova is organized in sequences. According to the Law on Education,⁹¹ children must first undergo one year of compulsory pre-school education. Primary school follows this, for children aged from seven (or in certain cases, six) years, usually ending at age ten (depending on the age at which the child began and on whether they have had to repeat any years). This is followed by five years of lower-secondary education in a Gymnasium. After graduation from the Gymnasium, compulsory education ends. Those who wish to continue their education may decide whether they prefer a two year certificate of general secondary education or a three year course at a Lyceum. Lyceum education is the prerequisite for entering higher educational institutions such as universities, academies and institutes. University graduates receive a bachelor's degree, which may optionally be followed by master's and doctoral degrees. Moldovan law stipulates that at least 7 per cent of Moldova's GDP should be spent on education.⁹²

The absolute number of pupils enrolled in secondary education has fallen over the past decade, both because

the size of school-age cohorts has fallen following low birth rates in previous years, and because of the scale of emigration. A recent initiative to streamline the school system has led to schools being restructured, especially in rural areas.

(b) Intergenerational challenges for teachers in Moldova

In Moldova, there is a scarcity of qualified teachers, in particular those of the younger generation and in rural areas. The profession is not considered sufficiently attractive by younger people: while qualification requirements for becoming a teacher are high, salaries only provide a below-average income. Teachers are therefore often retained in service beyond retirement age. In a context in which ongoing training of teachers in new teaching methods and curricula has been weak, some of these older teachers may use less modern approaches, which are in turn perceived negatively by students. Such experiences may foster poor attitudes amongst young students towards older persons more generally.

It would be more desirable for all age groups to be represented more evenly amongst teachers, so that pupils could profit from both the experience of older teachers and, perhaps, the newer approaches of younger ones. Opportunities should be provided to older teachers and pupils to increase their intergenerational interactions. Training to raise both teachers' and pupils' awareness of and sensitivity to age diversity may help to reduce prejudice and tensions.

Attempts have been made to send younger teachers into rural areas for their first assignments, but this is often not considered attractive by new recruits. However, a system could be introduced whereby young teachers agree to

⁹⁰ Ministry of Education (2011a)

⁹¹ Law no. 547-XIII (21 July 1995)

⁹² Ibid.

work in rural areas for a period of time after graduation, for example two years, receiving some benefits in return such as accelerated promotion prospects.

The labour market for teachers should be restructured so that they are able to pursue more appealing career paths which might attract more young people to the profession. In the medium term, salaries should be adjusted so that they correspond to the training required and the responsibilities held.

(c) Continuing education

Following compulsory schooling, there are several options available for further education. Vocational training and professional courses of three to nine months are available in, amongst other fields, construction, services, office work and handicrafts. The Ministry of Education operates 72 vocational and professional schools.⁹³ However, overall, the Ministry of Education has no strong mandate for education beyond university and post-graduate studies. In order to achieve an integrated education system it is advisable to strengthen capacities in the Ministry of Education with respect to adult education and lifelong learning, for example by employing staff with expertise in this field or by training existing staff. Most adult education activities seem to be centred on professional skills. More focus on information technology, management and language skills – all of which are relevant across different professions – may be useful. Such courses, which may help people to remain attractive in the labour market, are currently offered by private institutions. These institutions are required to obtain a licence from an authorizing body⁹⁴ which then also monitors the quality of training. The extent to which this authorizing body is able to guarantee quality is not clear, and quality is therefore ensured instead only through the market, insofar as this is possible.

Employers should be encouraged to engage in training of their staff. There could be an incentive system whereby employers are required to pay a percentage of their salary as an education tax and employers who offer training for their staff could recoup those taxes. In addition, people of working age who personally invest in their education could be offered tax benefits. Employers should also more explicitly be involved in the planning of adult education activities and in designing curricula, to make sure they correspond to actual needs.

The option of distance learning could be used more widely, as this model enables persons of different age groups to receive education without having to leave their workplaces or homes. It is important, though, to recall

that internet access is limited in rural areas, so distance learning should not be solely internet-based.

Specific learning opportunities for older people are largely unavailable in Moldova. The Ministry of Education has no explicit responsibility in this area. As discussed above in the section on integration of older persons in society, some countries have had positive experiences with Universities of the Third Age upon which Moldova could draw in devising its own strategy. In addition, opportunities for older persons to learn about housekeeping, gardening, handicrafts, prevention of disease, healthy eating or other fields may be explored at the community level. Such activities could be carried out with the help of volunteers. Training activities of this kind help to increase the ability of older persons to live independently, to stay fit by being mentally and/or physically active, to enhance their social and cultural inclusion by engaging in group activities, and to raise their self-esteem.

At the community level it may be useful to invest in the voluntary sector to build incentives for volunteer trainers – for example pensioners – to pass on their skills. Small investments, such as reimbursing costs of transport and meals and providing necessary training materials, may help. At the same time, younger people may be encouraged to volunteer as trainers in technological skills for older people.

Options for lifelong learning such as job-related training for older persons who are no longer active in the labour market have been largely absent, and the educational system of Moldova has focused mostly on the training of younger generations. Increases in life expectancy beyond age 55 and the consequent extension of potential working life mean that older people must increase their labour market competitiveness and employability.

It is important to equip older persons with the skills required to handle new technological tools such as computers and wireless communication devices, and to develop their cognitive, physical and sensory skills, not only for daily life but also to facilitate their continued integration in the labour market. An enabling environment for lifelong learning needs to be created in which available options are transparent and of high and consistent quality. Hence it is important to include all relevant stakeholders (including international donors and experts in matters related to lifelong learning, educational institutions, local employment offices, employers, trade unions, relevant NGOs and employees) in the development and implementation of a lifelong learning strategy. When further developing the law it would be advisable to create a working group composed of representatives of such stakeholder groups, and involve this working group in policy formulation.

⁹³ Ministry of Education (2011)

⁹⁴ The *Camera de Licentiere* (licensing board) [Law no. 547-XIII (21 July 1995) Article 37 (1)]

To further develop lifelong learning activities, it may be useful to explore cooperation with foreign partners who have functioning systems in place for bilateral support in this realm. Bilateral assistance may be useful for improving educational systems, curricula and competencies of staff.

Overall, a culture of lifelong learning should be developed and strengthened whereby the general public understands the importance of continuous learning. Starting from an early age, school children should be made aware of the concept of continuous learning so that they are willing to embrace the concept in the future, rather than feeling that their education is necessarily over when they leave school. Any campaigning activities related to the issue of an ageing society should include a component of lifelong learning. The advantages of ongoing education, including additional income generation, enhanced career prospects and integration into social networks⁹⁵ should be continuously highlighted via a diversity of communication channels. Available training opportunities or other incentives, such as tax reductions, should be advertised broadly.

Educational curricula should also be developed in a gender sensitive manner. Women and men may choose to develop different skills in order to pursue gainful employment or to spend their free time. They may also have been exposed to different learning opportunities in earlier stages of their life course, resulting in different training needs now. Resources should be distributed in

a way that considers the needs and preferences of men and women to an equal extent.

The 2010 draft Education Code for Moldova⁹⁶ addresses some of these issues. The Action Plan on Implementation of the National Development Strategy for 2008-2011⁹⁷ included objectives such as optimizing the educational system, ensuring access to quality extracurricular education and the establishment of regional continuous education centres for teaching staff within higher education institutions. 'Rethink Moldova'⁹⁸ (the strategic document discussed previously in the section on sustainable economic growth and development) confirms the major directions for educational reform: optimization of public expenditures for education, demand-based development of vocational education and training, and reforming the system of residential education (boarding schools). However, at the same time this report notes that most of the previous educational policies have not so far been implemented. Therefore, the Ministry of Education has developed a preliminary version of a new Education Law, which includes consideration of lifelong learning, creation of an education code and training of well-qualified teachers. As soon as this law comes into force, it will provide equality of opportunities for education to people of all ages. While it focuses on quality and efficiency in order to improve the economic competitiveness of the younger generations, it will also better integrate older persons into the contemporary labour market.

Recommendations

- 43. Develop incentives to attract younger people into teaching careers; ensure that all age groups are represented amongst teachers.**
- 44. Provide training on age diversity and sensitivity to both teachers and pupils.**
- 45. Offer accelerated career development prospects for new teachers undertaking a period of work in rural areas.**
- 46. Adjust teachers' salaries to correspond to their level of training and responsibility.**
- 47. Cultivate links between educational institutions and employers, e.g. through internship schemes and consultation on the content of school curricula.**
- 48. Promote and encourage lifelong education; increase powers of licensing bodies to monitor quality of training offered by private institutions.**
- 49. Strengthen capacities in the Ministry of Education with regard to adult education and lifelong learning, with a focus on information technology, management and language skills.**
- 50. Encourage employers to offer training to staff and non-staff.**
- 51. Involve employers in the design of adult education activities.**
- 52. For further development of educational policy, create and consult a working group comprising members of all stakeholder groups.**

⁹⁵ UNECE (2010a)

⁹⁶ Draft Education Code (2010)

⁹⁷ IMF (2008)

⁹⁸ Government of Moldova (2010)

9. Health and well-being of older persons

RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being

(a) Existing health system and policy

The current health system in Moldova evolved from the Soviet health system which provided generous access to broad health care services. In independent Moldova, it became clear that maintaining the same level of guarantees was unrealistic and unsustainable. From 1998 onwards, reforms were carried out with support from the World Bank. The Basic Law on Health Care⁹⁹ and the Law Regarding the Minimum Package of Free Medical Assistance Guaranteed by the State¹⁰⁰ limited state provision to a basic set of free health services.¹⁰¹ The Health Sector Strategy for 1997-2003¹⁰² focused on developing family-centred primary health care. The Strategy mandated the re-routing of resources from tertiary to primary care and the establishment of a network of family doctors.¹⁰³ Administrative reform of the health care system led to further decentralization, allocating more responsibilities to regional authorities while the role of the Ministry of Health shifted to setting guidelines and designing, implementing and monitoring health policies.¹⁰⁴ The actual provision of services, including home-based and long-term care, is handled district and municipal health care institutions. Local public authorities act in cooperation with the Ministry of Health to create the conditions necessary for the effective provision of public health care services.¹⁰⁵

In 1998, the Moldovan parliament decided to introduce compulsory health insurance for employed people¹⁰⁶ with a view to easing the financial strains on the system and improving performance. Although the law was adopted in 1998, however, it took until 2002 to establish the National Health Insurance Company (NHIC), and the mandatory health insurance system did not begin to function until 2004.¹⁰⁷ Employers and employees each contribute 3.5 per cent of the gross salary to the insurance fund.¹⁰⁸ Self-employed people or those working

in the informal sector can purchase insurance coverage on a voluntary basis, while certain economically inactive groups (including pensioners, disabled persons and those registered as unemployed, amongst others) qualify for free health insurance provided by the state.

The Health System Development Strategy 2008-2017¹⁰⁹ is designed to improve the stewardship of the health system. It calls for enhanced intersectoral collaboration with the inclusion of patients, civil society and professionals in decision-making. There is a focus on improved health system funding, service provision and the availability of human resources.¹¹⁰

The National Health Policy 2007-2021¹¹¹ prioritizes the reduction of health inequalities and the scaling-up of prevention. The chapter on the health of older persons focuses on a healthy lifestyle, nutrition, social integration, and involvement of civil society and community in rendering community services to older persons in need. It calls for local public administrations to systematically involve key actors at the community level, for example in the development of community care structures and social networks of shelters for older persons. Overall, the National Health Policy accurately reflects the health-related components of internationally-agreed policy frameworks on ageing. However, implementation of such a comprehensive policy will be a major challenge, and will need to entail breaking down the sometimes abstract principles into concrete actions.

In addition to specific health policies, reforms were introduced with the EU–Moldova Action Plan¹¹² with the aim of harmonizing the national framework with EU standards. Health aspects were also considered in the Economic Growth and Poverty Reduction Strategy¹¹³ and the subsequent National Development Strategy 2008–2011.¹¹⁴

Overall, improving the efficiency and quality of health care service provision is a major concern. Among the key challenges are the motivation of health personnel and prevention of their continued exodus from the country, and a lack of managerial capacity and skills in the administration of the health care system. Primary care facilities remain under-funded and under-equipped, and patients are faced with high out-of-pocket expenses. Older people in particular need of health care services may be the least able to make such out-of-pocket payments. A significant proportion of citizens is not covered by insurance, many of them belonging

⁹⁹ Law no. 411-XIII (28 March 1995)

¹⁰⁰ Law no. 267-XIV (3 February 1999)

¹⁰¹ MacLehose (2002), p.21

¹⁰² Government Decision no. 668 (17 July 1997)

¹⁰³ Cruc et al (2009) pp. 140-141; Atun et al (2008) p.121

¹⁰⁴ MacLehose (2002) pp.14-15

¹⁰⁵ Cruc et al (2009) p.150

¹⁰⁶ Law no 1585-XIII (27 February 1998)

¹⁰⁷ Cruc et al (2009) p.141

¹⁰⁸ Ibid. p.157

¹⁰⁹ Government Decision no. 1471 (24 December 2007)

¹¹⁰ Atun et al (2008) p.119

¹¹¹ Republic of Moldova (2007) & Government Decision no. 886 (6 August 2007)

¹¹² European Commission (2004)

¹¹³ Government of Moldova (2004)

¹¹⁴ Law no. 295-XVI (21 December 2007)

to the poorest households.¹¹⁵ A key challenge in service provision is the rural-urban divide. A large share of older persons lives in rural areas, and as such they are more likely than urban-dwellers to be distant from any medical service facilities.

(b) Health promotion and disease prevention

In Moldova, cardiovascular disease, cancer and respiratory diseases (that is, the major categories of non-communicable diseases) are major causes of death. Mortality due to cardiovascular disease increased by more than 40 per cent between 1992 and 2008.¹¹⁶ Alcoholism, hypertension, high levels of blood cholesterol and tobacco smoking are amongst the main risk factors for morbidity and mortality in Moldova. Mortality from smoking and alcohol-related causes is among the highest in the entire WHO European region.¹¹⁷ In this context, raising awareness of the dangers of unhealthy lifestyles at all stages of the life course, and enhancing the ability of people of all ages to make healthy choices, are important for minimizing the incidence and prevalence of non-communicable chronic diseases. This is true at all ages, but in particular for this Road Map it is important to emphasize that raising awareness of ways and reasons to reduce the incidence of non-communicable diseases throughout the life course will help people to age healthily, lowering the eventual impacts of these diseases amongst older persons.

The Government of Moldova has shown a strong commitment to taking measures for disease prevention. A National Programme to Promote Healthy Lifestyles¹¹⁸ was approved by the Government, proposing health promotion activities to be implemented, with support from the European Union. Furthermore, the National Centre for Preventative Medicine is currently being restructured into a National Centre for Public Health, Prevention, Promotion and Prophylaxis. The National Health Policy for 2007-2021 also includes a chapter on prevention. It emphasizes the importance of integrated involvement of all sectors of society at all levels: the state, with its central policymaking role; the various levels of administrative units (regions, municipalities, towns, villages); and businesses, families and individuals. The strategy recognizes the need for complex intersectoral actions to address the risk factors for non-contagious chronic diseases, by improving the socio-economic conditions to which these risk factors are linked systematically.¹¹⁹

¹¹⁵ Atun et al. (2008) pp. 112-114 & p.122

¹¹⁶ Cruc et al. (2009) p.142

¹¹⁷ Ibid. p. 147; WHO (2006) p.1; WHO (2011a)

¹¹⁸ Government Decision no. 658 (12 June 2007)

¹¹⁹ Republic of Moldova (2007) p.31

(c) Health care

The health care system in Moldova consists of primary, secondary, and tertiary care as well as public health services and emergency services.¹²⁰ The primary care sector is serviced by general practitioners, called family doctors. These family doctors are the first line of contact with the patients and provide general medical care for common conditions and injuries, as well as health promotion and disease prevention.¹²¹ Primary care institutions are usually public institutions, overseen by local authorities and the Ministry of Health. In general, there is an acute deficit of qualified family doctors in rural areas. Those institutions that are better organized have been somewhat more successful in attracting young doctors to rural areas, but others have resorted to re-employing retired family doctors.

Secondary care includes specialized ambulatory services and basic hospital care (excluding long-term care institutions), while tertiary care includes more complex specialist medical services.¹²² At the end of 2009 (the most recent figures available), there were 83 hospitals in Moldova, of which 73 were public and 10 were private.¹²³ In 2009 there were 609 hospital beds and 310 physicians per 100 thousand people.¹²⁴

Public health services are provided by the State Public Health Surveillance Service and include health promotion, non-communicable disease control, and immunization programmes. The state emergency service ensures availability of emergency care within 25 kilometres throughout the country.¹²⁵

Generally, the mandatory health insurance is supposed to cover medical expenses, including all primary and specialized ambulatory care consultations, as well as medical services and drugs delivered via the hospitals. Uninsured persons can receive a free consultation with a family doctor and assistance in major emergency cases. Otherwise, uninsured patients face considerable formal and informal out-of-pocket payments in order to access health care.¹²⁶ Around one quarter of the population does not have health insurance beyond the basic minimum package guaranteed by the state: a large share of this group is to be found in rural areas, since agricultural workers often have low incomes and no formal contracts.¹²⁷ Furthermore, a large proportion of older persons lives in rural areas and many of them may not have access to health insurance that goes beyond the basic state coverage for pensioners.

¹²⁰ Cruc et al (2009) p.151

¹²¹ MacLehose (2002) p.32

¹²² Ibid. p.38

¹²³ National Bureau of Statistics (2010b) p.185

¹²⁴ WHO (2011b)

¹²⁵ Cruc et al. (2009) pp.151-152

¹²⁶ Ibid. p.152

¹²⁷ Ibid. p. 163 & 169

In practice, both insured and uninsured patients are often required to make formal and informal payments which represent a considerable barrier to receiving health care.¹²⁸ Older persons in particular have been known to hesitate in seeking health care because of fear of the size of informal payments they would be requested to make and doubts about whether they would be able to afford them. Public opinion surveys in 2002 and 2003 found that respondents were in favour of introducing official tariffs to replace informal payments.¹²⁹

(d) Geriatric care

In recent years, some effort has been put into expanding geriatric care facilities. The Centre for Geriatrics and Gerontology, based in Chişinău, was founded in 2008 and has 40 beds. Most of them are offered to short-term patients for up to 14 days. The four regional departments (Orhei, Balti, Cahul, Hancesti) have 20 beds each. Geriatric care facilities have also been established in the districts (raioane), where ten to twelve geriatric care beds have been made available, depending on the size of the district. In addition, a scientific research laboratory for gerontology was established in 2009 under the auspices of the Academy of Sciences and the Ministry of Health.

It is not clear how well the number of beds made available for older persons corresponds to actual needs. It is important to monitor demand more systematically and to adjust capacities accordingly if this is found to be necessary. Since they are covered by the basic medical insurance system, geriatric care beds are designed to be occupied for a limited duration only. Meanwhile, palliative care (care of patients whose symptoms are not responsive to curative treatment: such care includes pain management and social and psychological support) is not yet readily available, if at all, and where it does exist it is usually provided by NGOs. A new legal framework for palliative care provision has been developed with the active participation of NGOs.¹³⁰ Actual needs for palliative care should be evaluated and services should become an integral part of the health care system. Non-governmental care providers who already have some experience in this field may assist in implementation.

(e) Home-based care

With the share of older persons in the population increasing, and the multigenerational family model – which has traditionally been a source of reciprocal care and support – becoming less universal, home-based care services may be the sole option for some older persons to stay at home and continue living independently.

Often, the provision of small, simple services at home can help older persons to avoid institutionalization and can increase their quality of life considerably. Some efforts have been made to introduce a functioning home-based care system in Moldova, using the established systems in France, Israel and the United States as models. Currently, home-based care is divided between medical and non-medical service provision. While medical services can be covered by the health insurance system for a maximum of three months, social services are often provided by NGOs. The Ministry of Labour, Social Protection and Family, working in collaboration with local public authorities, also employs social workers. Country-wide, 146 home-based care offices employ a total of 2,554 social workers, providing services to around 26,000 single elderly or disabled adults and children.¹³¹ More efforts are needed to ensure a diversity of skills within teams of home-based care workers so that they are able to provide multi-disciplinary services in order to address all the actual and potential needs of their older clients.

To improve access of older people and persons with disabilities to health care services at home, the Ministry of Health together with the National Health Insurance Company adopted a common order on home-based care services which allows contracting-out of service provision to private and non-profit institutions.¹³² This provides the framework for diversifying service provision by outsourcing some services to NGOs, the private sector or public-private partnerships.¹³³ A diversity of providers increases competition and provides additional choices to the clients. While this ideal framework exists in principle, it needs to be used more in practice.

Access to home-based care services is very uneven between urban areas and the rural areas where most older people live. To expand availability of both medical and social services, it may be worthwhile investing in expansion of volunteer medical services, including general practitioners as well as teams of specialists. With small incentives, neighbourhood solidarity could be enhanced so that older people who are in relatively good health could provide care for their more frail peers.

(f) Nursing homes

Traditionally, older people in Moldova have been taken care of by family members in multigenerational family settings. To move into a nursing home in older age is generally not seen as a desirable option and is even stigmatized. However, there may be circumstances where care cannot be provided in the traditional multigenerational family context – for example if the

¹²⁸ Ibid. p.158

¹²⁹ Ibid. p.159

¹³⁰ Ibid. p.171

¹³¹ National Bureau of Statistics 2010, p.206

¹³² Order no. 253 (MH from 20 June 2008)/no. 115-A (NHIC from 1 July 2008)

¹³³ Atun et al. (2008) pp.118-119

older person in question did not have children, has no surviving children, has no family remaining in Moldova due to international migration, or is him- or herself an immigrant or refugee. Large-scale international and internal migration, combined with low fertility, is making the traditional form of multigenerational family support less of a reality. Alternatives to care within the extended family therefore need to be made available. Meanwhile, efforts should be made to de-stigmatize institutional care. Six state-run homes for disabled adults and the elderly currently provide institutional care to over 2,000 people.¹³⁴ It is necessary to obtain a more complete picture of how many institutional places are actually needed. Efforts need to be made to offer fair access to nursing homes for all those requiring a place, especially to those most in need of specific protection such as refugees. Information about available options should be easily accessible and institutions should have transparent selection criteria.

Respondents interviewed on the topic indicated a need to carry out more systematic assessments of both the supply of and demand for long-term care. Such assessments would need to consider both needs and capacities in home-based care, geriatric and palliative care, day care centres and social canteens. Some of these services are currently only offered by NGOs, with the help of international donors, so efforts need to be made to sustain them on a longer-term basis. Day care centres do exist but are neither common nor evenly spread across Moldova, and it is evident that the need for such institutions must be examined more thoroughly. Once the level of need is better quantified, it will be easier to devise strategies to fulfil such need.

While expanding services is important, the largest share of care work will continue to be done by informal carers. Their important role needs to be acknowledged and they need to be supported to be able to fulfil their role adequately. Such support could be provided through community-based programmes offering financial aid, information and training. Respite or day care centres could help care-giving family members to combine their caring role with income-generating activities.

(g) Health Care Staff

The need to educate medical staff in the area of geriatrics and gerontology has been recognized by the Government over recent years. A five day training course in geriatrics – including doctor-patient relationships – was introduced into the curriculum of medical schools. In post-university training, a two week course is offered in which doctors of all specializations can participate. In addition, a diploma degree course in geriatrics has recently been established.

These avenues should be utilized to train new staff to work in the recently-created geriatric centres as well as in palliative care. Training programmes therefore need to be consolidated and expanded as necessary, and the status and recognition of health and social care staff working with older people should be improved.

Generally, there is a shortage of trained health care staff in Moldova, especially in rural areas where working conditions may be less attractive. Yet many older people live in rural areas and they may have health care needs that they find difficult to meet with the limited services available to them. Incentives need to be created to encourage health care staff to practice in rural areas. This may include financial incentives, opportunities for accelerated career advancement or other benefits. A system could be introduced whereby medical students, after finishing their studies, are encouraged to serve in remote areas for two to three years to gain experience of rural practice.

One of the reasons for the limited availability of qualified health care staff is the low salary level for this field of work, which both reduces the attraction of training for this type of career, and leads often to the emigration of trained health care workers. Many trained health professionals have found better-paying work abroad. Others who have remained in the system may resort to demanding informal payments from patients as a means of supplementing their low income.¹³⁵ Consequently, corruption in the health system presents major barriers to access, especially by older persons who may not be in a position to pay such charges. Fighting corruption in the health system, increasing transparency of charges and installing complaints mechanisms should therefore receive priority attention. Working conditions and salary levels should be adjusted so that staff have an incentive to remain in the country and do not resort to extracting additional charges from their patients. In addition, ethics trainings and awareness-raising on good practice should be enhanced. Since the introduction of the state health insurance scheme, payment levels for medical staff have increased somewhat and a system of bonuses linked to performance has been introduced for family doctors.¹³⁶ However, such structural problems are not easily overcome and demand continued attention.

The Ministry of Health should systematically monitor the ratio of health care staff to patients and maintain appropriate ratios, taking into consideration internationally-accepted standards for such ratios. While it is important to ensure sufficient numbers of qualified staff in rural areas, the Ministry should also make sure that an oversupply in urban areas is avoided.

¹³⁴ Cruc et al. (2009) p.170

¹³⁵ Mosneaga and Sava (2003) p.4

¹³⁶ Cruc et al. (2009) pp.155, 173-4

Training of health staff should also cover the area of relationships with patients. Personnel at all levels need to be constantly aware of the special needs of older persons, which will only increase in proportion among those seeking health care in the future. Communication with older persons may not always be easy. In addition, older persons may feel particularly vulnerable when coming into contact with the health care system. Their right to be treated with respect and to live in dignity when institutionalized must be protected. Continuous training of health care staff should include components specifically addressing the issue of relationships between patients and health care or social care staff, encouraging a sensitive and positive attitude towards older persons with special needs.

(h) Quality of care

The Government of Moldova has begun to take up the issue of assuring the quality of health care. Steps have been taken towards the development of clinical guidelines and protocols, and the setting of standards for care at different levels.¹³⁷ Such standard operating procedures have yet to be adopted by health care staff in their daily work, however, and more needs to be done to make these procedures an integral part of health care provision. In geriatrics, an existing collaboration of Moldovan care providers with French experts on standards of treatment for older persons¹³⁸ has been beneficial and should continue. Standards and guidelines should be regularly updated by groups of selected experts. Some standards for home-based care and palliative care have been developed, although development of long-term care policy is still pending.

Older persons who feel that they have been treated unjustly or unprofessionally should have the possibility of lodging a formal complaint with an ombudsperson who could mediate between the parties involved. In institutional settings, intermittent inspections and quality controls do take place. However, integrated quality assurance processes that are organizationally-led and aimed at continuous improvement are absent.¹³⁹ Some countries have had positive experiences with standing committees which include representatives of the inhabitants of institutions, to oversee quality on a regular basis and to address grievances. Similar structures could be implemented in Moldovan institutions of long-term care, such as nursing homes or day care centres.

To date, the potential for using information and communication technologies has not been fully exploited. There has been some use of modern technology for administrative, financial and epidemiological reporting. Increasing electronic storage and organization of data could help in monitoring quality of treatment, but good levels of data protection should be ensured. Such data, once appropriately anonymized, could also be used for scientific purposes. Data broken down by age and gender could be reviewed, thus helping to better target services in gender- and age-sensitive ways. More use should be made of the Internet to provide independent health information, as well as information about availability of services. An information policy should use electronic and other channels to ensure a smooth flow of information and to allow patients to make informed decisions and claim the services they need.

Recommendations

- 53. Improve affordability and accessibility of health care for vulnerable population groups, including older persons; expand the coverage of medical insurance, both ensuring that the basic state-provided package covers the needs of those who rely on it, and increasing the proportions covered beyond this level.**
- 54. Increase the sensitivity and responsiveness of the health care system to the special needs of older persons.**
- 55. Undertake research to gain a better understanding of the demand for long-term care (including nursing homes, palliative care facilities and day care centres) and for geriatric care beds.**
- 56. Develop an integrated system for provision of home-based and palliative care, better integrating medical and social services.**
- 57. Promote a competitive environment in which a diversity of providers can offer increased choice and efficiency to clients; create a framework conducive to outsourcing services and enhance the use of external service providers including NGOs, the private sector and public-private partnerships.**
- 58. Redouble efforts to de-stigmatize institutional care.**

¹³⁷ Cruc et al. (2009) p.166

¹³⁸ For details see http://usmf.md/index.php?page=relatii-interuniversitare_en

¹³⁹ Atun et al. (2008) pp.125

Recommendations

59. Increase access to nursing homes with the aim of providing a place for all those in need of one, especially those under the specific protection of the State such as refugees. Make information about available options and selection criteria easily accessible and transparent.
60. Give official recognition to informal caregivers and provide them with financial and practical support.
61. Expand and consolidate training programmes for health and social care staff working with older people, while working to improve their reputation and recognition.
62. Improve working conditions and salary levels and incorporate performance-based incentives; both as a disincentive for health care professionals to emigrate and to counteract the practice of extracting extra payments from patients. Supplement this with ethics training.
63. Monitor the ratio of health care staff to patients and maintain appropriate ratios.
64. Introduce standing committees, including representatives of inhabitants, in long-term care institutions.
65. Systematically implement ongoing quality assurance and monitoring mechanisms, and ensure that a complaints system is in place; engage expert groups to regularly update standards and guidelines for health care provision and preparation of medical personnel.
66. Enhance the use of information technology and the Internet in health care provision and record-keeping (accompanied by adequate data protection measures), and in the provision of independent health-related information, and information about service availability.

10. Housing and independent living

RIS Commitment 7: To strive to ensure quality of life at all ages and maintain independent living including health and well-being

The majority of older Moldovan people live in rural areas.¹⁴⁰ Many of these live alone or as a couple, or in 'skipped generation' households. It is not uncommon for villages to consist almost entirely of 'skipped generation' and older-persons-only households. In urban areas, many older people live in low-quality apartment buildings in a poor state of repair. Given the scale of internal and international migration of younger people (detailed above in the section on migration), an ever-decreasing share of these older persons is able to rely on their families for domestic support, whether from regular visits or by sharing a home with kin. With a large proportion of younger Moldovans living abroad – especially women who have traditionally borne the majority of the family caregiving responsibilities – older persons often find themselves with no option but to live alone or even in a situation in which they are giving, rather than receiving, care (i.e. providing care to grandchildren).

¹⁴⁰ According to Moldovan official statistics, 62 per cent of residents aged above the national retirement ages lived in rural areas in 2010. [National Bureau of Statistics of the Republic of Moldova (2010b)]

(a) Housing quality

Even before the end of the Soviet era, much of Moldova's housing stock was privately held because of the country's strong tradition of private home ownership (especially in rural areas). In 1993 all remaining state-owned housing was scheduled for privatization, and this process was largely completed by the end of the last decade.¹⁴¹ Some categories of tenants, including those with a work history of more than 35 years, received free transfer of their previously state-owned homes.¹⁴² Hence many older persons in Moldova own the apartments they live in. However, much of the housing transferred to private owners was in very poor repair and is in need of constant maintenance. In addition, rising energy costs mean that older people on meagre pensions find it increasingly difficult to heat their homes. The housing privatization process has thus increased the depth of social inequality as already vulnerable people acquired inferior housing that is costly to maintain, while better-off households obtained their higher-standard homes at the same low cost.¹⁴³

As detailed above in the section on social protection, the incomes of many older people in Moldova are very small. Furthermore, many whose working lives took place entirely or mostly under the Soviet system have few or no savings. This means that they have little money

¹⁴¹ Law no. 1324-XII (10 March 1993)

¹⁴² UNECE (2002a)

¹⁴³ Tsenkova (2007)

available to pay for rent and/or for the maintenance of housing. Housing conditions of older people are often substandard, especially in rural areas; the buildings may be in poor condition and homes may lack basic amenities such as running water or hot water, sewerage, central heating, and essential household fixtures and appliances.¹⁴⁴ Repairs and renovation are often beyond the financial reach of older people.

There are currently no institutions specifically tasked with conducting research related to housing quality (data collection, analysis, policy evaluation).¹⁴⁵ The establishment of such institutions, or the provision of funding to academic researchers in existing institutions, would facilitate the construction of an evidence base upon which to further develop policies relating to housing quality.

(b) Independent living

Most older persons wish to remain in environments that are familiar to them as they age, and in particular to stay in their own homes for as long as possible. Since this is not only the preferred option of most older people, but also the most cost-efficient strategy from the viewpoint

of the state, high priority must be given to ensuring that existing and new housing allows older people to live independently, healthily and in dignity in their own homes as an alternative to institutional care. This entails addressing issues of affordability, provision of necessary utilities and services, and physical accessibility. Forward planning is required to ensure that housing stock is suited to this goal of ‘ageing in place’; that is, when building new homes or renovating existing buildings, consideration should be given to the accessibility needs of older people even when the current inhabitants are young, reducing the need to seek alternative housing as they age.

As discussed in more detail in the section on health, programmes to support community-based long-term care should be strengthened both in rural and in urban areas, especially for older persons living alone. Training for health and social services personnel on methods for enabling older persons to enhance their self-reliance is especially important, along with clear minimum standards for home-based care. Community-based peer support groups could be used to provide simple and effective monitoring of vulnerable older persons through regular home visits.

Recommendations

- 67. Ensure all housing, new and old, is adequately supplied with clean water, sanitation and heating facilities.**
- 68. Consider providing subsidies to low-income pensioners to cover energy costs and essential building repairs.**
- 69. Develop research infrastructure on housing quality and specifically on the housing conditions of older persons, e.g. through providing targeted grants for specific research projects.**
- 70. Determine minimum standards of accessibility of housing for older and disabled persons (e.g. ramps at entrances, elevator access to higher floors, etc.) and ensure that all newly-constructed housing complies with these standards. Develop programmes to retrofit existing housing stock to comply with standards.**

11. Intergenerational solidarity

RIS Commitment 9: To support families that provide care for older persons and promote intergenerational and intragenerational solidarity among their members

Ensuring intergenerational solidarity is critical for maintaining social cohesion and a sense of fairness in the distribution of rights and responsibilities between generations.¹⁴⁶ It is a key notion when designing social

protection programmes, and is especially relevant in the design of pension schemes and long-term care schemes. The pursuit of intergenerational equity is reflected in the widely-held view that members of successive generations should pay broadly the same share of their disposable income during their economically-active life in order to receive equal benefit entitlements in terms of pension replacement rates during retirement.

A particular area in which the relationships between generations is changing rapidly, and where solidarity may be under threat, is in the giving and receiving of informal care between family members. Migration and urbanization have dramatically changed the traditional capacity of many Moldovan families or small communities

¹⁴⁴ Ibid.

¹⁴⁵ Ibid.

¹⁴⁶ UNECE (2010b)

to offer primary care to their dependent older family members. Indeed, older persons are emerging as primary carers for their grandchildren where the parents have migrated to seek employment.¹⁴⁷ There is thus a need to challenge stereotypes of the roles of generations within families and within Moldovan society.

(a) *Informal care of older persons*

A large-scale change in family care arrangements for older persons is taking place as a consequence of the growing trend of labour migration, both internal and international,¹⁴⁸ which results in reduced availability of family members for caring functions. Even in cases where the ‘middle generation’ of working age does remain in Moldova, it can be very difficult for them to balance caring responsibilities for both their children and their ageing parents with the demands of an increasingly challenging and competitive working life.

In this context of changing family environments, community care for older persons should be considered as a preferred policy option, not least because it is most often the preferred option of older people themselves, and also because home-based care is generally less costly than residential care. There is a risk, however, that home-based care may not be adequately resourced, which might result in economic and social strains on the caregivers and hence in an erosion of intergenerational cohesion. Policies supporting family-based care for older persons should specifically take measures to recognize the substantial role of women and their role as the brokers of intergenerational cohesion in this regard. This would require official recognition of informal care provision, e.g. through financial compensation, as well as acknowledgment of full-time carers’ essential role in the labour market. Absence from the paid labour market during periods of caring can result in financial penalties for the carers, not only in terms of foregone wages but in low pension contributions, most notably for women.

(b) *Older persons who care for family members*

The Moldovan proverb “if you don’t have an older person in your home, you have to buy one” sums up the value that the older generation brings to a household, often as reliable caregivers. At a time of life when it has traditionally been common for adult children to look after their ageing parents, many older persons in Moldova now find themselves with the responsibility of caring for their children or grandchildren, in many cases acting as the sole caregivers for grandchildren in the absence of the middle generation. Indeed, a critically

important and increasingly prevalent category of non-dependent older persons as primary caregivers for children, persons with disability and other older persons has arisen in the context of large-scale labour migration, since members of the working age population might be absent for some years. Data from a joint Government/UNICEF/HelpAge International study in 2008¹⁴⁹ found that around 75,000 children in Moldova had at least one parent living abroad, and 35,000 did not live with either of their parents.¹⁵⁰ These figures have shown an upward trend since 2000, and the study found that in most cases it was older persons, usually grandparents, who took on the duties of caring for these children.

Older caregivers and the children for whom they provide care face specific challenges: economic, physical and psychological. First, it may be legally or practically difficult for ‘skipped generation’ households to access certain public services and benefits. For example, findings from work with ‘skipped generation’ households in Moldova¹⁵¹ show that since care of migrants’ children by grandparents is usually organized on an informal basis, the older carers are unlikely to have access to child benefit payments. Formal recognition of this care arrangement would enable social services to ensure delivery of entitlements.

Second, many migrants support their children and ageing parents financially through remittances. Evidence shows, however, that older carers tend to prioritize their grandchildren or other dependants over their own needs, so that intra-household distribution of consumption is extremely uneven.¹⁵² Furthermore, the remittances are often erratic in size and frequency and cannot be relied upon as a source of income for the older caregivers.

Third, the specific health and mobility challenges that come with increasing age are compounded when older people find themselves with caregiving responsibilities. Many of the ‘skipped generation’ households contain a grandparent who suffers from a chronic disease, meaning that the older person or persons have an additional burden whilst the children are vulnerable.

Changes in family and household formation patterns are inevitable during the course of social change. Lamenting the demise of the ‘traditional family’ does not help to address the new challenges posed by such changes. It is important to find new ways to safeguard intergenerational solidarity. The majority of people in Moldova do maintain close relationships with their family members throughout their lives, and provision of care works in all directions: from young to old, from

¹⁴⁷ Grant, Falkingham and Evandrou (2009); HelpAge International (2008b)

¹⁴⁸ For more detail refer to earlier section on migration

¹⁴⁹ Reported in HelpAge International (2008b)

¹⁵⁰ Ibid. p.3

¹⁵¹ HelpAge International & Second Breath Moldova (2010)

¹⁵² Grant, Falkingham & Evandrou (2009) .

old to young, and within generations. Older people are not only, or necessarily, recipients of care but can provide substantial contributions in the form of care themselves. It is beneficial for all sectors, including the government, to strengthen these ties in a way that supports intergenerational solidarity.

(c) Society-wide intergenerational solidarity

Safeguarding intergenerational solidarity entails focusing not only on the relations between generations within families, but also on the broader relationships between different age groups in society as a whole. Solidarity is fostered when policies do not appear to favour any group at the expense of another, whereas tensions can arise when perceptions of unfairness (whether accurate or otherwise) become pervasive.¹⁵³ Hence in Moldova it is important to ensure that younger persons,

currently facing the challenges of economic crisis, high unemployment and changing demands for educational attainment, do not feel threatened by efforts to improve the conditions of life for older persons. This holds true with regard to pensions and other benefits, labour laws including those relating to retirement age, and the distribution of funds between different social services and facilities (schools, transport, health infrastructure etc.). As discussed in several of the preceding sections (on integration, stakeholder participation and others), increased transparency and active dissemination of information is key to enabling members of all age groups to remain informed about the policies affecting them, as well as to engage in the policymaking process itself. Cultivating a sense of trust in the stability of policies will allow younger generations to feel more confident that the support they provide to older persons during their youth will be afforded to them later in their own life.

Recommendations

- 71. Maximize opportunities for maintaining and improving intergenerational relations in local communities by facilitating meetings and cultural exchange for all age groups and avoiding generational segregation.**
- 72. Consider special provisions for families, and especially women, who provide informal care to older and/or disabled family members, such as credits towards pension contributions and health insurance for those whose care duties prevent them from holding employment.**
- 73. Consider the specific needs of older carers, especially grandparents caring for the children of migrant parents. In particular, afford formally-recognized carers the same benefit and service entitlements as parents.**
- 74. Ensure that the needs and perceptions of all age groups are taken into account in devising and publicizing policies aimed at older persons, so that a sense of intergenerational justice is maintained.**

12. Research and data collection landscape

The National Bureau of Statistics (NBS) has the main responsibility for collection, analysis and dissemination of national statistical data in a wide range of areas including, amongst many others, an array of themes relevant to the present subject: population; the labour market; gender; incomes, expenditures and living standards; health; education; housing; and social assistance (for a full record of activities see the National Bureau of Statistics' annual report).¹⁵⁴ Two divisions of the NBS are of particular relevance: the division for social and living standards statistics (comprising the social statistics section and the living standards statistics section) and the division for labour force and demography statistics (comprising the employment statistics section, the salary

statistics section and the demography statistics section). The NBS has published studies on health care, education, living standards, social exclusion, harmonized indicators for gender-sensitive development.

The Bureau conducts a Household Budget Survey, a Labour Force Survey and an agricultural survey at three-month intervals. The results of the 2004 census were used as the first-stage sampling frame for each of these surveys, with electricity companies' customer lists providing the basis for a second stage of sampling, producing a master sample used for all three surveys.¹⁵⁵ Census undercount and the absence of any mechanism to account for changes of address mean that this master sample is far from perfect. There is no longitudinal element to the surveys, meaning that it is not possible to use them to analyze the evolution of poverty or social exclusion on an individual-level basis. The survey instruments do contain some age-related elements, but a more systematic review

¹⁵³ Zaidi, Gasior & Sidorenko (2010)

¹⁵⁴ National Bureau of Statistics (2009b)

¹⁵⁵ National Bureau of Statistics (2008) p.8

is needed to ensure that pertinent topics are covered. Furthermore, age-disaggregated data need to be both generated and published in summaries and reports on all relevant topics.

The NBS provides data, downloadable on its website,¹⁵⁶ on morbidity and mortality by five-year age group, urban/rural location, disease classification or causes of death, location, marital status and by single years since 1980. A wide variety of other demographic indicators and data on topics such as health, education, employment and household income can also be accessed via this online database. Sources of data for this databank include the household surveys and population censuses, as well as other surveys conducted by the NBS. The interface allows creation of simple tables, graphs and maps but does not have the facility to cross-tabulate more than one indicator.

The next national census is due to take place in 2013 and is seen as an opportunity to improve data collection, especially in the area of recording migration data. So far, collecting migration data has been difficult since data collected under the Soviet system are no longer available and, today, citizens are not legally required to register or re-register as residents when they move. Therefore, migration data depend very much on administrative sources, for example the records collected by border guards and the Ministry of the Interior. More generally, many types of data have only been collected from 1998 onwards which can result in problems in detecting long-term trends.

The National Bureau of Statistics has made continuous efforts to improve the quality of its activities. As part of this endeavour, a Strategy of National Statistics Development for the period 2008-2011 was adopted.¹⁵⁷ The greatest challenges highlighted in this strategy were a lack of adequate financing for statistical work and a shortage of staff trained in statistical methods. Several areas for priority action were identified: improving information and communications technology (ICT) and related equipment; improving indicator systems and calculation methods; advancing statistical information collection systems; improving quality of publications and approaches to information dissemination; capacity-building among staff; and enhancing international collaboration.

In addition to this strategy, other efforts to enhance the activities of the National Bureau of Statistics are ongoing or planned for the future. These include a UNDP-financed project that has been underway since 2007 entitled 'Strengthening the National Statistical System'¹⁵⁸

involving a partnership between UNFPA, UN Women and UNICEF, along with several ministries. This project aims to improve the statistical infrastructure for monitoring progress towards development goals; to enhance capacities of both creators and users of statistics; to streamline data sources; increase levels of age-, sex- and other disaggregation; improve accessibility of data; and to further align the statistical system with international standards.

The National Bureau of Statistics has also requested to participate in a 'global assessment of the statistical activities' to be undertaken jointly with UNECE, EUROSTAT and EFTA. This will provide an update to a previous, similar assessment in 2007.¹⁵⁹ It may be hoped that specific attention will be paid to the production and analysis of demographic and ageing-related statistics.

Research related to ageing is also carried out by the Academy of Sciences of Moldova and the Academy of Economic Science. For example, ageing-related work has been carried out based on the demographic data available from the National Bureau of Statistics¹⁶⁰ and a generic analysis of ageing in Moldova was undertaken by a researcher funded by the Erste Foundation.¹⁶¹ However, no systematic demographic surveys have been undertaken in recent years, due to a lack of human or financial resources for demographic research, as well as to the lack of scientific expertise in the specific field of ageing. The most recent demographic survey was the 2005 Demographic and Health Survey (DHS),¹⁶² which is the only round of the DHS to take place in Moldova to date. In 2009, the Academy of Sciences carried out a pilot survey on women of reproductive age in the Chişinău municipality. The survey found that family and children were valued highly, that women wanted to have children, but that poverty, the housing situation and lack of care opportunities for small children often prevented women from fulfilling their intentions.

In 2010-2011 a study of ageing was conducted with the help of the United Nations Department of Economic and Social Affairs and UNFPA. This study drew on existing survey data, as well as including a module on ageing run on a reduced sample from the existing survey samples. The data, when available, should provide useful information for discerning benchmarks against which to measure future progress in the economic and social situation of older persons.

Overall it is evident that there is only a small circle of specialists in the area of demography and population ageing in Moldova. Until recently no direct training in demography was available within Moldova, so that

¹⁵⁶ <http://statbank.statistica.md/pxweb/database/EN/databasetree.asp>

¹⁵⁷ National Bureau of Statistics (2007)

¹⁵⁸ for details see <http://www.undp.md/projects/Statistics.html>.

¹⁵⁹ De Vries (2007)

¹⁶⁰ Paladi, Gagauz & Penina (2009)

¹⁶¹ Sainsus (2010)

¹⁶² NCPM & ORC Macro (2006)

experts in this area were usually primarily trained in sociology, economics, medicine or law, with demography featuring as a part of their education or subsequent career development. Many of these experts developed their demographic expertise on their own initiative, for example through doctoral studies. Continuing education opportunities at the Vienna Institute of Demography have been utilized by some, for example to learn about statistical analysis, statistical modelling, population projections, and analysis of demographic processes. In 2009, a new master's programme in economic

demography was launched at the Academy of Economic Studies.¹⁶³ The first fifteen students from this programme received their degrees in 2011. Career prospects for these new graduates are as yet unclear; whilst in theory there is a demand for their knowledge and capacities in various contexts, in practice the corresponding posts for demographers are yet to be established and funded. At the same time, for those already employed in the area, funds to enable participation in international conferences or training opportunities need to be made available on a regular basis.

Recommendations

- 75. Review regular household surveys for ageing-related content and enhance where necessary.**
- 76. Enhance the availability of age-disaggregated data from existing surveys and other data sources.**
- 77. Continue to build the capacities of the National Bureau of Statistics and the Academy of Sciences in data collection, analysis and evaluation and enhance integration into international data collection activities.**
- 78. Further develop education and career paths for experts in demography and intergenerational issues, including ageing.**

13. Monitoring and evaluation of ageing-related policies

For policymaking on such a broad and complex issue as ageing to be effective, especially when its overarching goal is mainstreaming ageing into all policy areas, it must incorporate a comprehensive approach to monitoring and evaluation (M&E). This entails examination of both instrumental variables (the laws, policies and programmes put into place) and impact variables (measures of progress towards desired outcomes, such as poverty and well-being indicators).

The field studies undertaken in 2010 reviewed the current Moldovan practice and capacities – in terms of both infrastructure and knowledge – to perform the necessary M&E tasks. The preliminary conclusion was that in principle the monitoring capacities are in place, but they seem to be in need of a general overhaul. This stems from the finding that existing monitoring practice is mostly geared towards accounting for resources spent in fulfilment of some specific task, rather than towards specific targeted achievements which have been agreed upon by an inclusive mechanism.

Evaluation efforts are not yet undertaken in a systematic way, and it seems that there is a belief that routine reporting and/or ad hoc analytical analyses are an adequate substitute for such systematic evaluation. Monitoring elements are not often included as integral parts of new policies and programmes. Standard routine line ministry reporting from the relevant ministries is in

place, though not necessarily in the form and shape that a modern reporting system requires.

As discussed in the section on the research and data collection landscape, the general basis for measuring key variables (as a basis for indicators) to assess the state of society, the economy, the regional and global environment is relatively strong. However, capacities for measuring the strengths and weaknesses of ageing-related policies and programmes, strategic issues and the factors underlying the evolving situation of key target groups, all need to be improved.

Successful M&E requires cooperation across all different levels of government and between state agencies and line ministries, as well as close cooperation between the state, public institutions and civil society organizations. The objective is to ensure that implementation of the recommendations of this Road Map results in outcomes that are satisfactory to all stakeholders in terms of quantity, quality and timing.

Effective M&E should take place throughout the policy design and implementation process, and continue on an ongoing basis after the new policy measures have become established. Such an approach will enable any problems in implementation to be identified and corrected in a timely manner. Stakeholders should be able to learn and adapt by systematically tracking the implementation of specific recommendations, and by assessing how the situation changes as a consequence of the related activities and outcomes.

¹⁶³ <http://www.ase.md/carteia/en/index.php?page=egd>

Recommendations

79. **Explicitly integrate elements of monitoring and evaluation into the implementation plans for each of the goals and actions identified in the annex table of this Road Map.**
80. **Assign clear responsibilities for regularly reviewing monitoring data and for generating advice on concrete actions suggested by the data. Incorporate both self-evaluation and external assessment, including participatory assessment by a range of stakeholders such as the target groups of policies and programmes.**
81. **Enhance capacities for monitoring and evaluation amongst those already skilled and knowledgeable in the area of data collection and analysis, such as those working in the National Bureau of Statistics and the Ministry of Labour, Social Protection and Family. Providing training to those with existing data handling skills will be an efficient means of capitalizing upon existing capacities. Such training should distinguish between data production and policy analysis, and should emphasize the monitoring and evaluation of both instrumental and impact variables.**

C. Outlook: the road ahead

The observations and recommendations identified in the preceding chapters, as well as the action plan in annex III, make it clear that the future holds many hurdles, some of them very significant. The interrelated challenges of migration, social protection and pension reform, coupled with the urban-rural divide and the persistence of poverty, form a particularly difficult backdrop against which to uphold the commitments of MIPAA/RIS. Nevertheless, both government and civil society in Moldova have demonstrated a strong commitment to achieving these goals and this is clearly a fundamental prerequisite for ensuring their fulfilment. Prioritizing from amongst the broad array of recommendations, identifying opportunities for efficiency gains, building capacities at all levels and ensuring the continued involvement of the full spectrum of stakeholders are all ongoing requirements to guarantee that this commitment is translated into successful implementation of the Road Map. Maintaining pressure on all ministries and major decision makers to enforce the concept of ‘mainstreaming ageing’—incorporating it into plans and programmes across all sectors—will also need to be a focus in the years ahead, given the diversity of other challenges competing for attention in the country.

The action plan annexed to this Road Map contains goals, objectives and actions deemed to be feasible,

in principle, during the period 2012-16. Nonetheless, many of them will require additional funding beyond the existing budgets of the entities responsible for their implementation. On top of this, the Road Map includes recommendations for other, longer-term or more complex and costly interventions, whose implementation will take longer than the period defined in the action plan. With all of this in mind, the international donor community is called upon to support all of these efforts. Even so, while it is true that many of the actions called for will require additional financing, it is also true that numerous others do not require extra resources but rather a redirection of efforts, improved efficiency and/or innovative approaches to existing practices. Hence, the road ahead must be viewed with an open mind in which new ideas are welcomed.

As member States across the UNECE region and United Nations Member States across the globe embark upon the second five-year cycle of review and appraisal of MIPAA, this Road Map and action plan place Moldova in a unique position in having undertaken this thorough appraisal of the current situation and analysis of the steps needed to move forward. In the spirit of regional cooperation, Moldova can now pass on lessons learned in this process to neighbouring countries and other countries across the region facing similar demographic, social and economic challenges.

Старость - не приговор!



Old age is not a sentence!
Andrei Lis (©)

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ANNEXES

BĂTRÂNII
din Republica Moldova
au dreptul la un astfel de
indicator rutier.



Older people in the Republic of Moldova have the right to such a road sign
Adrian Blănaru (©)

Introductory statement

(As you may know) the United Nations Economic Commission for Europe is working together with the Republic of Moldova to develop ageing-related policy in the country. Our project is entitled Road Map for Mainstreaming Ageing. To better understand the ageing situation in the Republic of Moldova, we will be talking to government officials, experts, people from academia, from non-governmental organizations as well as with ordinary people of different ages.

We would like to receive answers that reflect your own views even if they are not the same as the officially expressed views of your institution. We assure you that the answers you give will not be presented in connection with your name. Instead, the answers will be analyzed and the results presented in a summarized form and used for developing policy recommendations. In the final report, we intend to include the list of people with whom we have spoken. If you do not agree to be included in this list, please let us know.

Question(s)	Thematic area
Please describe how your work is related to older persons and ageing.	Positioning
Do you think ageing is an issue (important topic) in the Republic of Moldova?	General embeddedness of the issue
What are the main challenges related to ageing for the Republic of Moldova, in your opinion?	Perceived policy priority
In countries where population ageing started recently, government officials and politicians may have insufficient knowledge about this development and its implications on public policy. Do you think government officials and politicians are aware of the issues at stake when the population is ageing?	Policy priority
Does Moldovan government policy take into account that the population of the country is ageing? How? What are the main policy documents?	Policies, laws and programmes
Do you use any of those government policy documents in your ageing-related work? (Why not?) Which ones?	Awareness of policy framework
Do you think these documents are clear and understandable, are they user-friendly and helpful?	Strategic framework
Are you aware of internationally-agreed policy frameworks (plans, programmes, principles) on ageing? How are such internationally-agreed goals and principles on ageing reflected in Moldovan policy?	Strategic framework
To what extent are these policies put into practice? Please describe.	Policies, laws and programmes
Can you give good practice examples of policy implementation in the Republic of Moldova? Please describe.	Good practice
Do you think enough public funding is made available for older persons' needs? (Can you identify areas where the shortage of funds is particularly problematic?)	Budget

<p>Given the existing budget constraints, do you think the government and local authorities are doing enough to accommodate the needs of older persons relative to other age groups? For example, in the following areas:</p> <ul style="list-style-type: none"> • Associations, organizations • Labour market • Education • Pension, minimum income • Social security • Institutional care • Home care, available support for daily living • Transport • Cultural activities • ... 	<p>Policy priority Strategic framework Level of implementation Budget</p>
<p>Do you know of any arrangements for monitoring and evaluation of ageing-related policies in the Republic of Moldova?</p>	<p>Monitoring and evaluation</p>
<p>Who should carry out this function in your opinion?</p>	<p>Capacity for monitoring and evaluation</p>
<p>In the Republic of Moldova, are the needs of all age groups (children, young, middle generations, older persons, oldest-old) considered equitably or do some age groups receive too much or too little attention compared to others?</p>	<p>Society for all ages or one generation singled out</p>
<p>What could be done to accommodate the needs of these disadvantaged (vulnerable) age groups? Who should do it?</p>	<p>Identify possible recommendations</p>
<p>(Do you think that the legislation in the Republic of Moldova encourages independence and self-realization of older persons? Does it treat older persons equally to other age groups?)</p>	<p>Non-discriminatory framework</p>
<p>(How do you judge the degree of implementation of such laws?)</p>	<p>Implementation</p>
<p>Whom do you see as the main responsible body for ageing within government? Do you think this body covers all relevant areas sufficiently? If not, which areas are not sufficiently covered?</p>	<p>Institutional framework</p>
<p>Do you think the responsibilities of different institutions and organizations that deal with ageing and older persons are clear and understandable to everyone?</p>	<p>Institutional framework</p>
<p>In your opinion, do older persons know how to find out about their entitlements for benefits and assistance? Do they know where to turn to? Do they feel confident to go there?</p>	<p>Institutional framework</p>
<p>How is the implementation of ageing policies distributed between national, regional and local authorities? Is this distribution optimal in your opinion? If not, what should be changed?</p>	<p>Institutional framework</p>
<p>In your opinion, are the following actors (stakeholders) sufficiently involved in policymaking on older persons and ageing?</p> <ul style="list-style-type: none"> • private sector • non-governmental organizations • trade unions 	<p>Institutional framework, stakeholders</p>
<p>Are you aware of any public campaigns that highlight the positive contribution of older persons to society?</p>	<p>Awareness campaigns</p>

<p>Do you know of data collection and/or scientific research about older persons and ageing in the Republic of Moldova? Is it sufficient in your opinion? How could it be improved? In which areas is information and knowledge lacking in particular? Are relevant research institutes available and do they have the necessary capacities?</p>	Research landscape
<p>Do you have the impression that your country is sufficiently integrated into international cooperation and exchange of good practice on ageing policies? (Participation in international conferences, active collaboration with international organizations?) (Do you see any need for improvement?)</p>	International cooperation

Bătrânii au prioritate



Priority to older people
Adrian Blănuș (©)

List of participants (focus groups and interviews)

Note that the positions and affiliations given below were correct at the time of the interview/focus group—individuals may have changed roles since that time, e.g. following the Parliamentary elections in November 2010.

Moldovan central government officials	
Mr. Ion Negrei	Deputy Prime Minister
Representatives of Ministry of Labour, Social Protection and Family	
Ms. Valentina Buliga	Minister
Mr. Vadim Pistrinciu	Deputy Minister
Mr. Sergiu Sainciuc	Deputy Minister
Ms. Larisa Rotaru	Head of demographic policy section
Mr. Sergiu Morari	Head of employment relations and social partnerships
Ms. Nina Punga	Chief of directorate of human resources development and employment policies
Mr. Gheorghe Sîrcu	Head of wage policy
Ms. Laura Grecu	Chief of insurance policies department
Mr. Victor Gilca	Insurance policies department
Ms. Angela Chirilov	Chief of social assistance department
Ms. Lilia Pascal	Head of department of social protection of people with disabilities
Ms. Diana Stratulat	Head of analysis, monitoring and policy assessment department
Ms. Liuba Valcov	Senior consultant, demographic policy section
Ms. Aliona Crețu	Consultant, demographic policy section
Ms. Svetlana Bogatîi	Consultant, demographic policy section
National Bureau of Statistics	
Ms. Lucia Spoială	General Director
Mr. Oleg Cara	Deputy Director
Ms. Nina Cesnocova	Head of demographic statistics section
Ms. Elena Vâțcarău	Head of labour market and demography section
Ms. Jana Mazur	Consultant, demographic statistics section
Ms. Ala Negruța	Head of social statistics and standards of living section
Other representatives of the central public administration	
Ms. Tatiana Zatić	Head of medical assistance policy department, Ministry of Health
Ms. Aliona Andronatii	Consultant in medical assistance policy department, Ministry of Health
Ms. Marcela Țirdea	Consultant, Ministry of Health

Ms. Ludmila Sochircă	Consultant, analysis, monitoring and policy assessment department, Ministry of Education & President, Republican Medical Commission of Vitality Expertise
Ms. Galina Gavrilița	Analysis, monitoring and policy assessment department, Ministry of Education
Mr. Anatol Negara	Centre for Geriatrics and Gerontology
Ms. Irina Calestru	Chief of department of restructuring and organization of operations, National Social Insurance House
Chișinău Mayoralty	
Mr. Dorin Chirtoacă	Mayor
Ms. Luminița Suveică	Department of health
Ms. Eugenia Ceban	Department of social assistance
Mr. Mihai Sorochin	Department of municipal social support fund for population
Ms. Elena Tănase	External relations department
Transnistrian local authorities	
Mr. Ivan Tkachenko	Head of regional authority on health and social protection
Ms. Svetlana Arkadieva	Deputy head of regional authority on health and social protection
Ms. Lidia Diakonova	Head of regional statistical service
Representatives of academic community	
Mr. Victor Tvircun	Director, Institute for European Integration and Political Science
Mr. Gheorghe Paladi	Institute for European Integration and Political Science
Ms. Olga Gagauz	Institute for European Integration and Political Science
Ms. Olga Penina	Institute for European Integration and Political Science
Ms. Olga Poalelungi	Institute for European Integration and Political Science
Mr. Matei Constatin	Academy of Economic Studies of Moldova
Mr. Valeriu Sainsus	Academy of Economic Studies of Moldova
Ms. Galina Saveliev	Economic, Finance and Statistics Institute
Ms. Anna Tomceak	Economic, Finance and Statistics Institute
Ms. Tatiana Gribincea	Universitatea Libera Internaționala din Moldova (International Free University of Moldova), Faculty of Psychology and Social Assistance
Ageing-related NGOs	
Ms. Natalia Iablonscaia	Caritas Moldova
Ms. Tatiana Sorocan	HelpAge International
Ms. Valentina Carchelan	Association of Veterans from Ialoveni
Mr. Oleg Munteanu	Concordia Humanitarian Agency
Ms. Irina Baicalov	Second Breath, Balti
Ms. Eleonora Boguș	Demnitate, Orhei
Ms. Valentina Micotina	Vdohnovenie, Comrat

Ms. Galina Oltu	Lotosul de Aur
Ms. Ana Bologan	Alliance of NGOs in social protection
Mr. Nicolae Beşliu	Network of NGOs in the social sector
Ms. Elena Stempovschi	Association of Nursing
Ms. Lina Stenberg	Swedish International Development Cooperation Agency
Ms. Valentina Bodrug-Lungu	Gender Centre
Ms. Ana Semionova	Salvaţi Bătrânii
Media and Public relations	
Mr. Serghei Hasanov	President, Association of Advertising Agencies in Moldova
Ms. Galina Zablovackaia	Executive Director, Association of Advertising Agencies in Moldova
Ms. Alina Radu	Executive Director Ziarul de Garda (the Guardian) Newspaper
Mr. Mircea Surdu	Producer at the Public Television Moldova
Ms. Nadine Godu	Executive Director of the Center for Independent Journalism
National Trade Union in Moldova	
Mr. Chiriac Petru	Vice President, National Trade Union
Ms. Elena Contescu	Social and economic protection department, National Trade Union
Employers organizations / Private sector	
Ms. Valentina Postolachi	Chief of economic affairs branch, National Confederation of Employers
Ms. Emilia Malairau	Executive Director, American Chamber of Commerce in Moldova
Ms. Natalia Belicova	Head of employee services, Moldcell (mobile communications operator)
United Nations Agencies	
Ms. Kaarina Immonen	United Nations Resident Coordinator in Moldova
Mr. Boris Gîlca	UNFPA Programme Coordinator
Mr. Victor Lutenco	UNFPA Programme Analyst
Ms. Lovita Ramguttee	UNDP
Ms. Ala Pinzaru	World Bank
Ms. Ala Lipciu	ILO
Ms. Larisa Boderscova	National programme officer, health systems/ family and community health, WHO
Mr. Ghenadie Cretu	IOM



Old age is not a sentence!
Serghei Turcanu (©)

Action Plan arising from the recommendations of the Road Map for the period 2012-2016 (November 2011)

The Action Plan for implementation of the recommendations of the Road Map was developed in close cooperation with the interagency working group under the leadership of the Ministry of Labour, Social Protection and Family during September-November 2011.

The Action Plan provides details and suggests concrete actions on how to follow-up on the recommendations and objectives set out in the Road Map and in conjunction with other strategic policy documents. It is designed to cover the period of 2012-2016 and may be reviewed and adjusted to better respond to actions that might be foreseen in new strategic policy undertakings of the Government of the Republic of Moldova.

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
Goal 1. To mainstream ageing into policymaking in all sectors and to pursue internationally-agreed policy directions on ageing-related issues						
1.1. Enhance organized collaboration and information exchange on policymaking and good practice for ageing-related policies	1.1.1. Ensure the coordinated actions for implementation of the National strategic programme on demographic security for the Republic of Moldova (2011-2025)	End-2016	National Commission on Population and Development (NCPD), MLSPF All relevant ministries, NGOs, all levels of regional /district and local authorities, other stakeholders	UNFPA, UNECE, United Nations resident agencies	State budget	National strategic programme on demographic security for the Republic of Moldova (2011-2025) provides for implementation of the priority directions of the Road Map
	1.1.2. Continue and enhance inter-ministerial and inter-entity collaboration on ageing, both through the National Commission on Population and Development and through similar mechanisms at all levels of government, including regional and local government	Whole period				Allocation of staff time
Goal 2. To ensure full integration and participation of older persons in society						
Economic and social integration						
2.1. Provide older persons opportunities for continued engagement in the economy, as producers and consumers	2.1.1. Create organizational base providing for participation of local public administrations in attracting older people into the public and social life of the community, increasing their degree of self-organization	2012-2016	NCPD, Local public administration and the Congress of institutions of local government of Moldova (CALM), NGOs of older persons			Number of organizational measures to attract the elderly population introduced
	2.1.2. Create comprehensive service centres to support employability and development of older persons	2012-2016				Number of centres established
Political integration						
2.2. Enable older persons to engage in political life with full access to information and due access to decision-making processes	2.2.1. Introduce measures enabling older people, especially older women, to enjoy full rights in political decision-making by facilitating their access to information	2012-2016	Local public administration			Quantity of informational and promotional materials produced
	2.2.2. Increase involvement of older people in monitoring regional/district-level development programmes and budgets	2012-2016				Number of older people participating in relevant events, e.g. commission meetings
Cultural integration						
2.3. Promote social, community and cultural activities of older people with the aim of preventing their social exclusion	2.3.1. Develop comprehensive programmes aimed at increasing social inclusion and integration of older people, including allocating resources from national and local budgets to these programmes	2012-2016	Ministry of Labour, Social Protection and Family (MLSPF), Ministry of Education, Ministry of Finance, Local public administration		State budget	Number of older people participating in social activities

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
2.4. Support the cultural participation of older people through programmes that make use of their talents, professional skills and work experience	2.4.1. Produce new plays, concerts etc. with the participation of older persons as performers and other participants	2012-2016	Ministry of Culture, the subordinated organizations in area of culture, Associations/ Unions of art professionals		State budget	Number of new productions, number of older participants
2.5. Ensure opportunities for the cultural integration of older people living in rural areas	2.5.1. Organize tours of cultural productions to rural regions		Ministry of Culture, the subordinated organizations in area of culture, Associations/ Unions of art professionals		State budget	Number of performances and concerts organized in rural areas
	2.5.2. Provide transport for theatre and music groups to enable them to organize performances in rural regions		Ministry of Finance			Number of older viewers benefiting from performances in rural areas
Goal 3. To address and improve perceptions and images of ageing and older persons						
3.1. Develop and launch a media campaign to combat stereotypes, and to broaden the discourse in society surrounding the implications of ageing and potential solutions to the issues it raises	3.1.1. Present a wider spectrum of images of older people in advertising and mass media including TV channels (Regionalni Kanal, Zdež) and newspapers					
	3.1.2. Develop, produce and disseminate advertising materials to promote the Road Map and its ideas via radio, television and internet					
	3.1.3. Develop, produce and disseminate newspaper, magazine and billboard advertising to raise awareness of the Road Map and regular programmes on television and radio discussing the key issues raised by it.	Launch in 2011, repeat continuously throughout whole period	MLSFP Means of the mass media			Number of publications produced on the theme of integration of the older population
	3.1.4. Organize press releases, press conferences and other press events on the Road Map					Number of press conferences held
	3.1.5. Undertake discussion and debates on urgent questions on this topic with the participation of mass media					Number of meetings with involvement of the mass media on subject of participation of older people and on related discussions of their problems and decision-making
Goal 4. To ensure the participation and collaboration of all stakeholders in ageing-related policymaking						
4.1. Ensure that older persons' voices, as well as those of youth and the middle generations, are heard when devising policies which affect them	4.1.1. Provide mechanisms by which people of all ages can contribute to policymaking. Take steps to avoid over-reliance on channels that would exclude older persons and other groups with limited knowledge of or access to modern communications tools.					Diversity of age groups represented amongst those giving feedback to public consultations

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
4.2. Increase and embrace channels for the engagement of civil society, the private sector, trade unions, academics, United Nations agencies and other international organizations to engage in the formulation, implementation and evaluation of policies and programmes	4.2.1. Increase involvement of all types of stakeholders in the meetings of the NCPD (see 1.1.1 and 1.1.2)	Whole period	NCPD	All resident United Nations agencies		Number of participants and number of stakeholder groups represented at NCPD meetings
	4.2.2. Ensure that the Government and its constituent ministries continue to work closely with international organizations to include ageing as a cross-cutting issue in the programmes of work of both the Government and the international organizations					Evidence of issues related to ageing in Government programmes, plans and strategic documents
	4.2.3. Work closely with academic institutions to ensure that policy decisions are made on the basis of accurate information and a sound understanding of concepts amongst all stakeholders		All relevant Ministries, academic institutions	Approved research-based policies in the area of ageing		
	4.2.4. Ensure that relevant staff members and the MLSPF focal point on ageing participate regularly in international conferences, meetings and workshops in order to learn from experiences in other countries and on sub-national and international levels.		MLSPF			
Goal 5. To promote equitable and sustainable economic growth in response to population ageing						
5.1. Ensure that the needs of older persons raised in this Road Map and in the National strategic programme on demographic security for the Republic of Moldova (2011-2025) are taken into account and integrated into fiscal and economic policy, and are considered in future Government strategy documents	5.1.1. Review all central Government strategy documents and plans (starting with the new National Development Strategy) for ageing-related content and ensure that specific economic vulnerabilities of older persons are sufficiently accounted for (see also 4.2.2)		MLSPF, other ministries			Second National Development Strategy and any subsequent Government strategies and plans contain suitable consideration of the economic needs of older persons
Goal 6. To adjust social protection systems in response to demographic changes and their social and economic consequences						
6.1. Take steps to improve the social protection system	6.1.1. Put forward specific proposals for amendments to the law aimed at changing the forms and methods of determining and obtaining contributions to the budget of the state social insurance system	2012-2016	MLSPF, National Office of Social Insurance			Number of proposed amendments drafted and agreed upon with National Office of Social Insurance, ready to be presented to Parliament for approval Frequency and decisions of meetings with representatives of National Office of Social Insurance

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator	
	6.1.2. Ensure broad participation in discussions of the working groups on unification of the pension system while taking into account interests of the beneficiaries of preferential entitlements	2012-2016				Diversity of participants in these meetings	
6.2. Enhance the participation of representatives of civil society in work of relevant public institutions	6.2.1. Promote participation of representatives of public and veterans' organizations in monitoring of activities on the granting of social services and benefits	2012-2016	MLSFP, National Office of Social Insurance			Frequency of participation of civil society in consultations	
6.3. Increase public awareness surrounding the system of state social benefits and entitlements	6.3.1. Inform the population about advantages of the state social insurance and of paying full and timely contributions	2012-2016	National Office of Social Insurance, media			Frequency of television and radio broadcasts, published articles and a number of accessible WEB pages with the information on the need for pension system	
	6.3.2. Ensure that information on available benefits and entitlements and eligibility criteria is easily accessible						
6.4. Continue investigations into the development of alternative (private) pension systems and implement the resulting recommendations	6.4.1. Develop a mechanism for the differentiated and gradual increase of retirement age and years of required for entitlement to a state pension, by taking into account regional/European practices (2 to 2.5 months a year)	2016			World Bank, International Labour Organization	Recommendations are developed for increasing retirement age and length of qualifying period	
	6.4.2. Develop a mechanism of gradual redistribution of allocations between public and private forms of social payments					Number of people insured and benefiting from alternative (private) pension systems or from a mixture of public and private sources	
	6.4.3. Create legal framework to govern activities of private pension funds	Whole period	MLSFP, Ministry of Economy, Ministry of Finance and National Commission on Financial Market			Recommendations drafted for regulatory framework	
	6.4.4. Identify mechanisms to insure private pension funds and provide certain state guarantees for contributors in case of inefficient administration of private funds					Approved legal/statutory act for introduction of effective private pension fund	
	6.4.5. Facilitate the development of private insurance amongst relevant parties: employees, employers, financial structures, state						
	6.4.6. Carry out a permanent information campaign on potential/necessary reforms of the first pillar pension system and the necessity of introduction of the elements of a private insurance system						Number of meetings and publications discussing issues of reforming pension system
	6.4.7. Regulate the social insurance system and social aid for providing minimal social income for older people without sufficient financial means, especially people living alone or those who have dependants			MLSFP Local public authorities, Trade unions, 'Patronat' (National Confederation of Employers)			Number of approved legal/statutory acts

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
6.4. Continue investigations into the development of alternative (private) pension systems and implement the resulting recommendations	6.4.8. Identify older persons living in particularly difficult economic circumstances and provision of access to social benefits and services to such people. Development of alternative forms of providing care to older persons					Number of approved documents on policies for additional social security of older people
	6.4.9. Reduce gender gaps in pension system					Development of recommendations on possible increase of the retirement age for women
	6.4.10. Examine the potential impacts of increasing the retirement age of women on their economic situation and on the pension system as a whole					Number of research activities undertaken
	6.4.11. Enhance involvement of civil society, including older people, in provision of social services. Involvement of older people in volunteering					Share of older people participating in volunteering
	6.4.12. Examine legal provisions relating to the family, especially those relating to women who provide informal care for older people and/or people with disabilities. Such provisions may include, for example, transfers for pension contributions and medical insurance for those who cannot work due to family care duties	2011-2012				Development of recommendations for increasing the responsibility of children in taking care of their parents
Goal 7. To enable labour markets to respond to the economic and social consequences of population ageing						
Access to the labour market						
7.1. Increase older persons' access to the labour market	7.1.1. Improve employment legislation in order to combat ageism and to provide better opportunities for the employment of older persons	2012	MLSFP			Amendment and adoption of the law on employment and on social security for jobseekers
	7.1.2. Inform and raise awareness amongst older people of employment possibilities in the labour market	Whole period	National Employment Agency	International Labour Organization	State budget, external development partners	Share of older people in employment
	7.1.3. Organize advertising campaigns, drawing the attention of employers to the fact that employment of older people is part of the solution for overcoming labour force deficits in certain sectors of economy	Whole period	National Employment Agency, media			Share of older people in employment
Employability of older workers						
7.2. Provide opportunities for integration of older persons into the labour market, taking into account their specific physical, medical and other needs	7.2.1. Identify criteria for acceptable physical and intellectual workloads for older people of different age groups and, on the basis of these criteria, identify possible means for workplaces to adjust in order to fulfil these criteria	2012-2016	MLSFP, Ministry of Health	World Bank, International Labour Organization, World Health Organization		Share of older men and share of older women in employment

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
7.2. Provide opportunities for integration of older persons into the labour market, taking into account their specific physical, medical and other needs	7.2.2. Examine possibilities for the achievement of full employment of people of pre-retirement age by introducing preferential taxation for companies which create jobs for and hire older persons	2012-2016	MLSPE, Ministry of Finance	World Bank, International Labour Organization, World Health Organization		
7.3. Integrate older persons, especially those in rural areas, into the labour market	7.3.1. Develop a programme of support and preferential credit arrangements for local authorities in support of local public companies which employ older persons in rural areas and to assist in providing markets for their products. 7.3.2. Develop a programme of support and preferential credit arrangements for local authorities in support of older entrepreneurs wishing to establish new businesses					
Goal 8. To enable society to adapt to the ageing-related economic and social consequences of migration and return migration						
8.1. Improve systems for estimating current migratory flows and projecting future flows, including likely numbers of returning migrants	8.1.1.1. Develop statistics in accordance with international requirements and recommendations, including the requirements of the European Commission on the basis of regulation 862/2007 of the European Parliament (11 July 2007) on statistics on migration and international protection [also UNECE guidelines on migration statistics]	2012	Ministry of Technologies and Communications, NBS, MLSPE, Ministry of Internal Affairs, Ministry of Foreign Affairs and European Integration, Ministry of Economy Ministry of Health, National Office of Social Insurance	International Organization for Migration, EU, UNECE		Main demographic, economic and labour force indicators Size of remittance flows Emigration of Moldovan citizens Number of Moldovan citizens living abroad Return migration flows Number and demographic structure of resident non-Moldovans
Addressing the challenges of migration in relation to older persons						
8.2. Improve access to information about current and future social protection rights of migrants	8.2.1. Publish information on rights and duties of population, including migrants, on the official web pages of relevant organizations as well as via other information dissemination channels such as leaflets and newsletters	2012-2016	MLSPE, National Office of Social Insurance			Published information available and updated as necessary
8.3. Ensure effective mechanisms for social protection of migrant workers during their time abroad and upon their return to Moldova, as well as for non-Moldovans legally present in Moldova and holding a permanent residence permit	8.3.1. Improve methods of estimating numbers of Moldovan temporary labour migrants abroad and enhance exchange of relevant information with their destination countries in order to ensure the international transferability of the social guarantees to which they are entitled 8.3.2. Improve mechanisms for ensuring fulfilment of social rights of foreign workers who currently live in Moldova	2012-2016	MLSPE, Ministry of Foreign Affairs and European Integration, National Office of Social Insurance	International Labour Organization, International Organization for migration World Bank		Indicators based on IOM migration country profile

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
Regulating migratory flows						
8.4. Expand channels for legal migration from Moldova, while focusing on the protection of migrant workers' rights	8.4.1. Negotiate and settle contracts relating to labour migration with countries of destination for migrants from Moldova	2012-2016	MLSFP, Ministry of Foreign Affairs and European Integration	International Organization for Migration	State budget	Signed contracts
	8.4.2. Promote circular migration	2012-2016	MLSFP	EU, Destination countries	State budget, external aid	Projects developed to promote circular migration
8.5. Create favourable conditions for the return of Moldovan migrants from abroad	8.5.1. Inform migrants about priorities and possibilities of returning and re-integration in Moldova	2012-2014	MLSFP, Ministry of Economy, Ministry of Foreign Affairs and European Integration	International Organization for Migration	State budget, external aid	Creation of advertising campaigns
	8.5.2. Develop and implement collaborative initiatives with countries of destination with the goal of promoting return and re-integration of those who have migrated temporarily from Moldova			International Labour Organization		
8.6. Guarantee the social protection rights of migrants while abroad and upon their return	8.6.1. Negotiate and settle contracts relating to social security with countries which accept labour migrants from Moldova	2012-2016		MLSFP, National Office of Social Insurance		Bilateral agreements reached and implemented
	8.6.2. Apply the rules of bilateral agreements for the accrual and transfer of pension and other benefits				Number of people whose social benefits are transferred internationally as a result of bilateral agreements	
Goal 9. To promote lifelong learning and adapt educational systems in order to meet the changing economic, social and demographic conditions						
9.1. Create environments conducive to the development of lifelong learning, in particular for older people	9.1.1. Develop programmes to facilitate learning for older people which build upon their existing experience and knowledge	2012-2016	MLSFP, Ministry of Education	International Labour Organization		Degree of participation of older people in adult education and self-education programmes
	9.1.2. Introduce methods for monitoring the impact of adult education and self-education programmes on the employment and welfare of older people					Share of those participating in programmes who then find employment
9.2. Increase provision of training for older people	9.2.1. Develop and implement programmes of lifelong education, targeted in particular at older people	2012-2016	Ministry of Education, MLSFP, other concerned departments, social partners			Number and geographical spread of programmes developed

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
9.3. Ensure access of older people from rural areas to programmes of lifelong learning and self education	9.3.1. Develop and expand networks, including through the use of modern communication technology, for information and career guidance for older people in rural areas	2012-2016	Ministry of Education, MLSPF			Increased share of older people in rural areas enrolled in lifelong learning programmes
9.4. Increase the role of schools and teachers in age-sensitive education, in organizing assistance for older persons, and in planning events in which pupils and older persons can interact	9.4.1. Increase opportunities for intergenerational interaction through employment of teachers of all ages and inclusion of intergenerational issues in school curricula 9.4.2. Involve schools in intergenerational exchanges such as volunteering; both by young people assisting older persons, and vice versa	Whole period Whole period	Ministry of Education, educational authorities			Age structure of teachers across the country Inclusion of intergenerational awareness raising in school curricula Number of events organized by schools to promote intergenerational interactions
Goal 10. To ensure the health and well-being of older persons						
10.1. Improve access to and quality of health services for vulnerable groups, including older persons	10.1.1. Improve medical supervision of older people by family physicians, including supervision at home	2012-2016	Ministry of Health, public health facilities			Number of older people under the medical supervision of a family physician, including those living at home
	10.1.2. Revise the list of medications and treatments compensated from the funds of mandatory medical insurance	2012-2016	Ministry of Health			List of medicines compensated from the fund of mandatory medical insurance
	10.1.3. Introduce care facilities for older people in regional hospitals, and increase availability of home-based care in the regions	2012-2014	Ministry of Health			Plan of regional provision of medical and home-based care for older people
	10.1.4. Develop and obtain approval of a mechanism for reassigning hospital beds from short-stay to long-stay beds and/or for increased provision of long-term care services	2012-2013	Ministry of Health			Number and location of beds which are to be reassigned from short to long stay Mechanism of reassignment approved
	10.1.5. Develop geriatric places in regional hospitals corresponding to the age structure of the local population	2012-2016	Ministry of Health			Number and location of long-term hospital beds and/or availability of long-term care services
	10.1.6. Allocate medical services in accordance with changed population profiles depending on the needs of population	2012-2016	Ministry of Health			Number of geriatric places in relation to the age structure of the population
	10.1.7. Further develop financial mechanisms for funding health and social services	2012-2016	Ministry of Health, MLSPF, local public authorities			Number of patients receiving geriatric and palliative care services Financial mechanism for funding health and social services is developed

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
	10.1.8. Expand medical insurance by providing a guaranteed package of coverage which can be accessed by all members of the population	2012-2016	Ministry of Health, National Office of Social Insurance/ National Company on Medical Insurance			80 per cent of the population insured
	10.1.9. Revise the unified programme of mandatory medical insurance in order to increase medical services supplied to insured people, including older people	2012-2016	Ministry of Health, National Office of Social Insurance/ National Company on Medical Insurance			Unified programme of mandatory medical insurance is revised
	10.1.10. Strengthen the National Centre for Geriatrics and Gerontology, in terms of human resources, capacities and equipment	2012-2016	Ministry of Health			The National Centre of Geriatrics and Gerontology is strengthened and equipped
Home-based care						
10.2. Develop an integrated service delivery system for social care, home-based care and palliative care, which better integrates medical and social services	10.2.1. Evaluate needs for home-based care, geriatric and palliative care services	2012-2016	Ministry of Health			Number of patients in need of home-based care, geriatric and palliative care services
	10.2.2. Evaluate and obtain approval of budgets for public medical services, home-based care and palliative care	2012-2016	Ministry of Health			
	10.2.3. Identify and provide support for suppliers of patient transport	2012-2016	National Medical Insurance Company, Ministry of Health			Approved regulation of and support systems for suppliers of patient transport services
Home-based care and geriatric care						
10.3. Expand and consolidate training programmes for health and social care staff working with older people	10.3.1. Improve university and post-graduate study programmes on geriatrics and gerontology, in accordance with international and European standards	2012-2016	State University of Medicine and Pharmacy 'Nicolae Testemicanu', Ministry of Health			Programmes improved
	10.3.2. Improve postgraduate training of physicians in geriatrics	2012-2016				Number of physicians specializing as geriatricians
	10.3.3. Introduce continuous medical education in geriatrics and gerontology	2012-2016				Number of health workers who have taken postgraduate courses in geriatrics and gerontology
	10.3.4. Conduct scientific research on population ageing, social gerontology, the structure of morbidity amongst older people, risk factors for premature ageing, and the profile of diseases amongst older people in order to evaluate the needs of the geriatric care system					Number of scientific research studies conducted Number of PhD theses completed on topics related to gerontology
Goal 11. To facilitate independent living for older persons						
	11.1.1 Develop long-term strategy to ensure that all housing stock is supplied with clean water, sanitation and heating facilities					

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
11.1. Determine minimum standards for accessibility and for utility provision with the longer-term goal of ensuring that both old and new housing stock complies with these standards	11.1.2. Target specific subsidies towards low-income older persons to cover energy costs and building repairs					
	11.1.3. Determine housing accessibility standards for access of disabled persons and those with limited mobility. Provide legislative support for such standards with longer-term goal of ensuring that new housing stock complies with them					Standards developed Legislation designed and introduced
	11.1.4. Develop programmes to retrofit existing housing stock in order to comply with 11.1.1. and 11.1.3.					Programmes devised
	11.2.1. Improve amount and quality of information collected on the housing and living conditions of older people, in the framework of forthcoming census	2013-2014	National Bureau of Statistics	UNFPA and other potential donors		Census-based indicators of housing quality, including, amongst others: type of housing and type of building; year of construction; form of tenure; amenities and equipment in the property; number of rooms; Internet access
Goal 12. To promote intergenerational solidarity in families and in society						
12.1. Increase recognition of the importance of positive intergenerational relationships and promote such positive relationships	12.1.1. Enhance the degree of official recognition of informal family-based care, including care provided for older persons and care provided by older persons (e.g. by grandparents to grandchildren)	Whole period	Local and regional authorities			
	12.1.2. Develop a draft law to supplement the Family Code, on identification, accounting, status and monitoring of children left behind by emigrant parents and left without parental care, and those caring for them (such as grandparents)		MLSPF			Approved amendments to the Family Code
	12.1.3. Advertise successful models of solidarity between generations; for instance, organize an annual Family Festival					Advertising materials produced Number of people participating in Family Festival and similar events
Goal 13. To ensure a research and data collection landscape suitable for the collection and analysis of trends and processes related to ageing and population						
13.1. Enhance the availability of age-disaggregated data from existing and new data sources, especially in areas which can be expected to have specific relevance to older persons	13.1.1. Systematically review and analyze household surveys containing questions on population ageing, enhancing where necessary	Whole period				Age-related indicators in existing surveys are identified. New questions are introduced to existing surveys if deemed necessary

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
13.1. Enhance the availability of age-disaggregated data from existing and new data sources, especially in areas which can be expected to have specific relevance to older persons	13.1.2. Develop and carry out a time use survey	2012	National Bureau of Statistics, MLSPF	UNDP UN WOMEN [Strengthening Moldova's capacity to manage Labour and Return Migration (Project financed by European Union and implemented by Swedish Public Employment Service)]		Time use indicators disaggregated by age, sex and types of activity
	13.1.3. Develop and implement an add-on module to the labour force survey on the transition from work to retirement	2013-2014		Potential donors: EU, UNDP		Indicators describing activities in the years preceding retirement, planned and actual age of retirement, reasons for continuation of professional activity
13.2. Improve collection of data on older people and related topics, disaggregated by age, gender, location etc.	13.2.1. Define benchmark indicators which permit measurement of progress		National Bureau of Statistics, MLSPF			Established and approved indicators
	13.2.2. Ensure quality, compatibility and comparability of indicators derived from the various administrative and statistical sources, and ensure their availability for monitoring of processes and for research work	2012-2014	National Bureau of Statistics, National Office of Social Insurance, MLSPF			Indicators of social security and social protection of older people
	13.2.3. Develop infrastructure for the use of modern technologies to facilitate data collection					
	13.2.4. Ensure participation of the country in international process of data collection and exchange on ageing					
	13.2.5. Conduct scientific research on various aspects of population ageing					
	13.2.6. Conduct research on solidarity between generations					
	13.2.7. Conduct research on public perception of problems and needs of the older people					
	13.2.8. Conduct research on the system of residential facilities providing services for older people and their ability to cope with accelerated population ageing, as well as on the need for alternative models of care for older persons					

Goals and objectives	Actions	Timeline	Responsible entity	International Partners	Budget implications	Indicator
13.3. Continue efforts to build national capacity in data collection and analysis	13.3.1. Further develop educational and career paths for demographers and others working on population and intergenerational issues including ageing					
	13.3.2. Create a National Demographic Centre as recommended by the Green Book on Population and the Government Activity Plan 2011-2014	2013	Academy of Science of Moldova, NCPD			Approved decision on creation of National Demographic Centre
Goal 14. Monitoring and evaluation of ageing-related policies						
14.1. Adopt a comprehensive approach to monitoring and evaluation of efforts to mainstream ageing into all policy areas	14.1.1. Enhance capacities for monitoring and evaluation among those who already have knowledge, skills and experience of data collection and analysis, such as employees of the National Bureau of Statistics and MLSPF, ensuring that training focuses on the distinction between data production and policy analysis, and on the monitoring and evaluation of both instrumental and impact variables	From 2011	MLSPF			Number of software programmes introduced for training
	14.1.2. Implement the planned project to introduce computerized information systems for social assistance	2016				Functional automated system is introduced
	14.1.3. Monitor implementation of the strategy on reproductive health for 2005-2015 as it relates to older people, including the sexual health and counselling of older people					
14.2. Ensure that Moldova participates to the fullest possible extent in the cyclical review and appraisal processes of MIPAA/RIS	14.2.1. Examine other countries' utilization of the range of indicators proposed by UNECE for monitoring the implementation of MIPAA/RIS, with the goal of developing a set of indicators for such monitoring in Moldova	2012-2014	National Bureau of Statistics, MLSPF	UNECE, UNFPA		Set of indicators necessary for preparation of national report is developed
	14.2.2. Identify gaps in availability of indicators for monitoring instrumental variables (laws, policies and programmes)					Areas for improvement are identified
	14.2.3. Identify gaps in availability of indicators for monitoring impact variables					