



United Nations  
M O L D O V A

# **Annual Consolidated Progress Report on Programmes Implemented under the Towards Unity in Action Multi-Donor Trust Fund**

**Reporting period: 1 January-31 December 2017**

**UN Country Team in the Republic of Moldova**

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## Introduction

This Annual Consolidated Progress Report on Programmes Implemented under the Towards Unity in Action Multi-Donor Trust Fund (henceforth ‘the Fund’) covers the period from 1 January to 31 December 2017 and reports on the implementation of programmes approved for funding under the Fund. As per the provisions in the Memoranda of Understanding between the Fund and Participating United Nations Organizations (PUNOs), and the Terms of Reference of the Fund, the Annual Consolidated Progress Report is compiled based on information and data submitted in PUNOs’ individual Annual Narrative Programme Reports. As of March 2018, eleven PUNOs are parties to the Fund: FAO, ILO, IOM, UNAIDS, UNDP, UNFPA, UNICEF, UNODC, OHCHR, UN Women, and WHO.

The Fund has two basic functions: (1) as the administrative mechanism to support programmes involving more than one UN agency; (2) as a vehicle to access additional resources not otherwise available to UN Moldova. Oversight and strategic direction of the Fund is provided by the Towards Unity in Action Multi-Donor Trust Fund Steering Committee, which is co-chaired by the State Chancellery as the national coordinating authority for the UNPF, and the UN Resident Coordinator. The donors to the Fund and PUNOs are also members of the Steering Committee.

The “Towards Unity in Action Multi-Donor Trust Fund” has been established for a period of five years covering the 2013-2017 UNPF. On the request of the UN Country Team, the fund was extended to December 2019 in order to accommodate the duration of the programmes under the fund. However, the extension is only for the ongoing activities and prohibits the initiation of new projects under the fund. The Fund now has programmes under two of the three windows (Governance and human rights and Social Inclusion).

In 2017, the political landscape in Moldova was characterized by relative stability especially when compared to previous years. Nevertheless, the democratic backsliding marked by weak public institutions, endemic and systematic corruption, a lack of social cohesion, and poor civic identity has taken Moldova back at least a decade in terms of media freedom, rule of law and political pluralism. 90% of the population, compared to 84% in 2016, consider that the country is not governed in the interest of the majority.

As per a World Bank forecast, Moldova’s economy growth for the second half of 2017 is 3.5%. This growth was mainly driven by trade and construction, whereas the agricultural sector saw negative growth. After the shock caused by the bank fraud in November 2014, the financial sector continued stabilizing in 2017. According to the National Bank, foreign investments grew in 2017 by 17.7% compared to 2016, and amounted to 44% of GDP. IMF forecasts for 2017 show that the public finance deficit increased to the level of 3.2% of GDP, while the public debt had declined by 1.9% in 2017. The biggest foreign source of investments in Moldovan economy comes from the EU. These factors contribute to the increased public support for the EU compared to the support for the Russia-led Eurasian Economic Union– 60% versus 44%.

The Transnistrian settlement talks in the 5+2 format took place late November under the chairmanship of the OSCE for the first time in one-and-a-half-years. As a result, the negotiators from Chisinau and Tiraspol signed four protocols related to addressing the issues of the operation of Romanian-language schools in the Transnistrian region, recognition of the Transnistrian Region education diplomas, telecommunications licensing, and access for Moldovan farmers to lands under de facto Transnistrian control. Regardless of recent progress, the settlement remains distant and requires the participants of the process to continue their present approach and seek further agreements.

2017 was a special year for the United Nations (UN) in the Republic of Moldova as the Government and the UN signed the United Nations Partnership Framework for Sustainable Development 2018-2022. In partnership with the Swiss Development Cooperation (SDC), UN supported the Government to evaluate the Moldova National Development Strategy 2020 and develop a new blueprint for “Moldova 2030”. The UN in Moldova contributed to addressing the complex challenges present in the country through joint efforts and integrated approaches, which delivered a number of impactful results in different areas.

## **Programmes Implemented under the Fund**

### **Joint Action to Strengthen Human Rights in the Transnistrian Region**

#### ***Programme overview***

Due to its disputed status, the Transnistrian region of the Republic of Moldova on the left bank of the Nistru River has been excluded from major developments occurring within the international human rights system during the past two decades. None of the UN Treaty Bodies have received sufficient information on human rights in the Transnistrian region. Following a report by UN Senior Expert on Human Rights Thomas Hammarberg, published in February 2013, UN has stepped up its efforts to support protection of human rights in the region.

The Joint Action to Strengthen Human Rights in the Transnistrian Region of the Republic of Moldova (Phase 2) is grounded in the United Nations human rights-based norms and standards and aims at strengthening the effective exercise of human rights by people residing in the Transnistrian region through fostering improvement of institutional frameworks concerning disability, gender based violence and HIV, PWIDs and people in prisons. The joint action builds upon previous work in the aforementioned areas, carried out during 2014-2016.

The project is funded by the Government of Sweden, is implemented through the UN Multi-Donor Trust Fund Towards Unity in Action, and is framed around three inter-linked components (rights of persons with disabilities, women in vulnerable situations, and HIV/AIDS) which are led by OHCHR, UNDP, and UNAIDS/UNODC. These are aiming to advance Moldova's progress towards the achievement of Sustainable Development Goals 16 (Peace, Justice and Strong Institutions), 5 (Gender Equality), and 3 (Good Health and Well-Being).

#### ***Results***

##### **Component 1: Non-Discrimination and social inclusion of children and adult persons with disabilities (OHCHR)**

In 2017, the project team was completed with a Local Coordinator in the Transnistrian region and a Communication Consultant. Regardless of difficulties in finding suitable candidates for these positions, the team succeeded to recruit a communication consultant with extensive knowledge of the local media context, but with no knowledge of Romanian and English.

In 2017, the programme continued with the second round of awareness raising and capacity building activities, focusing on economic, social and cultural rights, rights of vulnerable groups as well as advocacy and leadership skills. These activities were included as a result of lessons learned from the previous year and are essential for the effective organization and functioning of a human rights platform in the Transnistrian region. In 2017, the programme procured a car adapted for the needs of people with disabilities (PwDs), which fully meets the security requirements. This is the first car of this kind imported to Moldova. An Assessment of the existing social services for the PwDs in the Transnistrian region was conducted and proposals for the creation of community-based services were developed.

In 2017, 61 duty bearers, including service providers and in-field specialists from the left bank of the Nistru River were capacitated on international standards related to the rights of persons with disabilities. Special focus was placed on the service provision for this category of the population. Interactive methods and best practices from CIS states were presented. The participants positively appreciated the training sessions and expressed interest in exploring other opportunities for capacity building, namely exchange visits to the right bank of the Nistru River on issues related to the deinstitutionalization of PwDs.

In 2017, 5 normative acts related to the social protection, employment, administrative proceedings and participation of PwDs in the electoral processes were assessed. Most of them are not compliant with CRPD and recommendations were provided for their review and adjustment. There is a need to select a narrower field in the normative framework

and review both primary and secondary acts to identify not only normative provisions, but also their application. The process of advocacy with the de-facto authorities for their revision and adjustment will be initiated in 2018, with one potential area of work being the process and procedures of disability determination.

Based on the assessment of existing services for PwDs in the Transnistrian region of the Republic of Moldova and following the consultations with representatives of NGOs working with PwDs in the region, a decision was taken to focus on three services including legal and psychological assistance and assisted employment. In the framework of this cooperation, 2 study visits were organised to the right bank of the Nistru River to show-case the good practices in providing social services for PwDs at the local level. Many participants were very enthusiastic and expressed interest in replicating such services on the left bank. A request for expression of interest was launched and NGOs are expected to come forward with their views on the piloting of these services in the Transnistrian region. The programme identified Ribnita and Dubasari as potential localities for the piloting of the social services but remained open for proposals from NGOs from other localities as well. One of the prominent results in this area is that one of the NGOs from the Transnistrian region, which has been involved in the programme awareness-raising and capacity-building activities, for the first time, has submitted an alternative report to the Committee on Economic, Social and Cultural Rights.

In 2017, a second round of trainings was launched to raise awareness of PwDs and representatives of NGOs, with a special focus on the rights of PwDs, economic, social and cultural rights, as well as advocacy and networking skills. These events were organised on both banks of the Nistru River, in Balti, Comrat, Grigoriopol and Ribnita. So far, 104 women and 73 men with a wide geographical representation (circa 50 localities from the whole Moldovan territory) have been informed on the rights of PwDs and developed their capacities on advocacy and networking. Out of these, more than 120 PwDs, many of whom for the first time, have been informed on their rights and had the chance to interact with peers and representatives of NGOs from the other bank of the Nistru River.

Following capacity building exercise and identification of interested activists and NGOs working with PwDs, an initial coordination meeting was organized in Grigoriopol in February 2017. The meeting addressed potential cooperation among different stakeholders and was attended by 58 persons, mostly PwDs, representing 17 NGOs from both banks of the Nistru River. As a result, a MoU on the creation of the Platform for Sustainable (Community) Development was signed by 15 NGOs, out of which 13 are from the left bank of the Nistru River.

In July 2017, the first meeting of development partners on information-sharing and updates in the implementation of programmes and projects with relevance to the recommendations of Thomas Hammarberg was organized. A matrix with various development partner interventions was developed and OHCHR has offered to support them with ensuring the human-rights compliance of the respective interventions. So far, there have been no requests in this respect, but OHCHR will continue to explore other avenues to promote HRBA to development.

In order to increase its outreach, the programme launched its Facebook page in 2017 reaching currently more than 260 followers. OHCHR has also started its work with mass media, promoting human stories of PwDs and encouraging journalists to publish materials on this subject. Moreover, a press-club for the journalists from main Transnistrian media outlets in the form of an open dialogue between the representatives of PwDs and mass-media was organised. As a result, more than 60 media materials were published/broadcasted on the rights of PwDs, as well as the on the activities of the programme. This area will require further attention in 2018, as the wider awareness raising campaign will envisage closer cooperation with mass-media.

## **Component 2: Enhancing gender equality and combating violence against women (UNDP)**

The activities within this component have been implemented with some adjustments, which have not affected the achievement of the targets set in the workplan. Considering the evolutions in 2017 on both banks of the river, the project needed to adapt to the local context. Thus, some activities under objectives 2.2 and 2.4 related to strengthening the capacities of local professionals and implementing an awareness campaign were adjusted to better meet local needs. The positive attitude of the representatives of the de-facto authorities towards the work done by

the created services provided favorable conditions for establishing an effective interaction and coordination related to the needed joint work in assisting victims of domestic violence.

During 2017, UNDP continued its collaboration with the NGO Resonance, a partner that was identified during the previous stage of the project after a public competition and that was included from the outset as a partner in the project document. Through this collaboration, in continuation of the previous work from 2014-2016, it was possible to continue assisting victims of domestic violence within the established temporary shelter. The project aims to build an effective system of social assistance for specific categories of people (victims of domestic violence), where the shelter is the basic element. Other services developed by the project, such as regional Hubs, are part of the system and come to complement the activities run by the shelter. Later on, these practices can be taken over by the de-facto authorities to develop services for other disadvantaged social categories.

During the reporting period, the temporary shelter assisted (in both residential and daily regimes) 202 persons, out of which 199 victims of domestic violence, including 125 women and 74 children, and 3 perpetrators. Depending on personal needs, all beneficiaries received one or more services as follows: 59 women and 74 children received humanitarian assistance (food packages, hygiene packages, clothing, footwear, medicines, as well as medical examinations), out of which 203 food packages were allocated for 51 women and 55 children and 55 sets of personal hygiene products were allocated for 27 women and 28 children; 130 beneficiaries received psychological counselling and 87 beneficiaries received legal consultations. The shelter helped 16 women find a job. Starting from December 2016, the regional hubs from Grigoriopol and Slobozia, managed by a partner NGO, Rodnoy Bereg Jenskije Initsiativy, offer safety and prevention services to people in these districts. The hubs provide direct assistance to the victims, disseminating information regarding the domestic violence phenomenon through mobile teams, refer cases to the shelter and/or other services and support the beneficiaries to participate in the labor market.

Achievements so far include:

- The temporary shelter is functional and continues to provide assistance in most complicated cases of domestic violence from the Transnistrian region;
- Two regional hubs in Slobozia and Grigoriopol ensure outreach to local communities, identifying, assisting and referring cases of domestic violence;
- The reconstruction works of the new, permanent shelter started with the financial support of the EU and the Government of Sweden;
- The continuity of the assistance process for the victims of domestic violence has been ensured through the signing of amendments to the grant agreements with the selected partner NGOs, covering the period November 2017-May 2018;
- Since the establishment of the services to assist victims of domestic violence, namely the temporary shelter located in Bender and the regional centers in Grigoriopol and Slobozia, 1,065 people were assisted and oriented, of which 946 women, 96 children and 23 men, as follows:
  - 606 women were informed about the phenomenon and consequences of domestic violence as well as about existing services;
  - 459 people received at least one service or more;
  - 178 persons received legal services;
  - 311 persons received psychological services through 1,659 consultations;
  - 62 beneficiaries were oriented professionally by the psychologists from the temporary shelter and regional hubs;
  - 29 people were professionally trained;
  - 44 people were employed.

As a result, the issue of domestic violence has received such visibility for the first time in 39 communities, increasing awareness of people about the phenomenon and consequences of domestic violence as well as about existing support services. Thanks to the new services, 80 women managed to start their lives again, 64 leaving the aggressor and

another 16 divorcing. More than 90 victims managed to re-enforce their rights, particularly when it comes to property rights, restoration of parental rights, receiving social payments, obtaining ID cards for them and their children, being also assisted to report the facts of the violence from the intimate partner to the police. According to data presented by the partner NGOs, 129 women can be considered socially integrated after the intervention of the newly trained specialists.

Based on the two-week internship at the Drochia Maternal Center and the Drochia Center for Assisting Perpetrators from 2016, the regional hubs were helped to develop and implement, along with hub regulations, a set of documents including 14 templates to help manage the cases of beneficiaries. These documents comply with the practical guidelines aimed to improve the activity of the centers of social reintegration, being adapted to meet the local working circumstances.

To increase and standardize the level of knowledge of the NGO specialists in the area of assistance of domestic violence victims, an open competition for selecting a training provider for the specialists from created services was re-launched in November 2017. The training will cover topics related to social assistance and psychology.

An adjustment has been proposed when it comes to the study visit to a new EU member state: several study visits to similar services on the right banks of the Nistru River are assessed to be more appropriate currently. The project board proposed to redirect the resulted savings to the reconstruction of the permanent shelter due to the insufficient resources within the EU-funded SCBM programme, which cannot cover all the reconstruction costs. Finalizing the permanent shelter will have a huge and immediate impact in assisting the victims of domestic violence and combating of this phenomenon in the Transnistrian region, and is, therefore, proposed to be a priority.

Three training software packages for vocational and educational training (VET) and labor market activities are being used within the vocational orientation process. Based on the professional courses, most of the beneficiaries were employed on the local market as seller-cashiers, manicurists, hairdressers, cook-confectioners, bank cashier-operators, and administrative assistants. The case of a woman from Grigoriopol, who was helped to obtain a driver's license, later on obtaining the taxi driver license, is illustrative of the benefits that the training programme can bring. Thanks to the establishment of a partnership with representatives of Local Employment Agencies, the shelter and regional hubs receive weekly information about existing job vacancies, with full details of employers and the job conditions. Regarding the impact of the economic programme, thanks to this intervention, 44 victims of domestic violence obtained their economic independence. They broke the circuit of violence and started a new life without the fear to be economically dependent from the aggressor.

In accordance with the concept on the implementation of the awareness raising campaign developed in 2016, two competitions were carried out in order to select five local NGOs to run an awareness raising campaign. They were supposed to receive support in developing local social marketing campaigns, which were to be used to foster community climates that promote zero tolerance against domestic violence (including training sessions and grants). The limited number of received offers, which covered only 40% of the planned territorial coverage, suggested that media campaigns through social networks, at least on the issue of combating domestic violence and trafficking of human beings, are still premature on the left bank, and the NGO sector does not yet require support for such information tools.

Hence, it has been proposed to adjust the activities within this sub-area by strengthening capacities of regional hubs, to ensure better information of citizens from remote areas. It has been assessed that the local awareness campaign can be better implemented through the two regional hubs created within the project, which have an excellent outreach and which undertake frequent field visits through their mobile teams.

### **Component 3: Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons (UNAIDS/ UNODC)**

In September 2017, 11 NGO and medical specialists from both banks paid a visit to Minsk, Belarus. The aim of the visit was to familiarize left bank specialists and decision makers with the drug dependency treatment program while

ensuring HIV/AIDS prophylaxis for PWUDs. Despite having a fast-growing epidemic, concentrated mostly in PWUDs and people in prisons, the left bank, Transnistrian region of Moldova does not implement neither Methadone nor any other evidence-based drug treatment programs. The first attempt to organize a study visit to Minsk, Belarus, for the left bank health, internal affairs and CSO specialists took place in July 2017. Nevertheless, because the lists of delegates and traveling dates were revised several times by the de facto authorities, the Moldovan Bureau for reintegration and the project board, it was only possible to conduct the visit to Minsk only in September. Initially, the visit was planned for decision makers, however the final list of 11 delegates included only technical specialists.

According to the Project Risk-analysis, the scenario (A) was to open Opioid Substitution Treatment (OST) on the left bank, however this is still a highly political issue; scenario (B) was to ensure opening of OST on the right bank, ensuring that one site is closer to the left bank. Due to UNODC advocacy efforts, new Opioid Substitution sites have been opened in 3 more rayons of the right bank with the financial support of GFATM, namely Rezina (which is closed to the left bank), Nisporeni and Ungheni. The cost savings resulted from sites opening are to be used for further implementing the HIV and Law Enforcement component.

UNODC Moldova has successfully completed the assessment of the service package in Transnistrian prisons. The exercise was conducted by an international consultant with over 20 years of experience identified by UNODC HQ and agreed with the Transnistrian de facto authorities. The international expert developed a comprehensive questionnaire addressed to inmates and requested assistance from the de facto authorities in gathering statistical details. The statistical data was provided only partially by the de facto authorities. The expert, jointly with the UNODC coordinator, visited two penitentiary institutions and participated in meetings with the CSO (including former inmates). The subsequently drafted report was peer reviewed, edited, translated into Russian and printed. As a follow up, the authorities examined the report and agreed on continuing the activities, indicating seven priority areas of interest which UNODC will address in due manner. The report in English and Russian was submitted to Transnistrian counterparts. On May 26th, 2017, a technical meeting took place to present the report to 15 justice and health specialists and local decision makers.

In order to technically assist the prisons system from the left bank and ensure the implementation of UNODC assessment recommendations and better implementation of the comprehensive package of services in prisons, two national consultants were contracted. The consultants are revising the existent normative documents and other types of documents while proposing updates in line with UNODC recommendations.

As a follow up, in August 2017, a training for prison, health and CSO specialists on HIV, TB and drug dependency services integration in prisons was conducted on the left bank. Twenty-five (25) specialists received complex knowledge and in-depth understanding of the harm reduction services in prisons. The international trainer contracted to conduct the 3-day training ensured that work groups are efficient in building the dialogue between authorities and CSOs. During his visit to Moldova in May 2017, Prof. Kazatchkin drew the attention to the right bank authorities on the scaling down of HIV and drug dependency services in prisons.

A mapping of all HIV normative framework documents (about 50 policy documents) was performed by the AIDS Regional Center from Tiraspol and the NGO "Zdorovoie buduscee", being expertized by the human rights specialist of UNAIDS HQ and OHCHR. A local consultant was hired to review the normative acts and to propose adjustments and recommendations. The report was reviewed through international human rights standards lens by the UNAIDS international consultant and from gender and human rights perspectives by the OHCHR office in Moldova. A workshop to present and discuss the findings and recommendations and to prioritize the normative acts to be reviewed was organized on 28 July 2017, in Tiraspol. The working meeting was attended by all interested stakeholders: representatives from the AIDS Center, medical staff, representatives from NGOs and technical juridical staff from the de facto Ministry of Health. During the working meeting, a roadmap on future steps was developed, which was integrated later in the Transnistrian region sustainability plan. The road map established 3 waves of normative acts' adjustment to be ended by 2020. Until now, the first seven documents (the first wave) have been aligned to international human rights standards and draft adjustments have been developed, particularly related to travel restrictions, exclusion of HIV from the list of most dangerous diseases, restrictions related to work and regular check-

ups, RH, child protection and the right to adopt children as well as criminal liability for donors. The documents are with the de facto authorities for approval.

In the period September – October 2017, around 30 persons – medical specialists and representatives from the civil sector – participated at a set of three workshops to ensure capacity-building of Transnistrian NGOs in distinct thematic areas – prevention, support and care, monitoring and evaluation, advocacy and mobilization and support of the efforts to strengthen partnership relations between NGOs and public institutions, in particular the AIDS Center. During the workshops, a roadmap on future activities of each stakeholder, with clear indicators and responsibilities, in HIV field was developed and integrated later on in the sustainability plan for the Transnistrian region.

An innovative medical waste management equipment was procured to ensure the safe disposal of needles and syringes collected through harm reduction projects and to meet the ecological requirements towards the process. It was jointly decided with the NGOs providing harm reduction services and the donor to install the equipment at the A.O. UORN office in Balti, to cover the needs of the harm reduction programmes in the North area (for more than 10 rays). The technical specifications were developed and approved by the interested stakeholders. As the financial resources were not sufficient to cover the cost of the equipment, resources were leveraged from the Global Fund to Fight AIDS, TB and Malaria – PAS Center. The equipment was installed at the beginning of June 2017 and is currently functional and available for all waste gathered from NGOs active in harm reduction.

In September, two training sessions were organized for LEA from the left and right banks. All in all, 50 police officers and 10 CSO representatives were trained following UNODC specialized training modules. HQ HAS specialists ensured that a tailored approach was applied on each bank. Since the right bank is more advanced in applying and developing LEA and HIV approaches, the focus was put on alternatives to incarceration while developing referral schemes for PWUDs. On the left bank, this was the first ever training for LEA specialists who for the first time participated in a training with CSOs active in Harm Reduction services.

A study visit for 10 CSO and LEA representatives from both banks of the Nistru River was organized in October to Vienna. It was the first ever joint police study visit since the war in 1992. During the visit, the participants had the possibility to observe integrated “one-stop-shop” services for PWUDs, services for women who suffer from domestic violence, learn the Viennese model of police’s involvement and participate in referral of PWUDs while having a chance to meet with UNODC HAS and LEA specialists.

The process of conducting the Stigma Index that was launched in October 2016 and continued in 2017. The Stigma Index measures the knowledge, attitudes and practices relates to stigma and discrimination due to HIV status among people living with HIV. It is also conducted by people living with HIV, especially the data collection. The methodology, developed by an international NGO of PLWH. An informative meeting with Transnistrian de facto authorities was held in Tiraspol on October 17, 2016. During this meeting, the main activities to be implemented under the current project were agreed upon, including conducting a Stigma Index study on the left Bank. At the same time, several meetings with the civil society representatives and other stakeholders were organized to agree upon the methods of implementation and the timeline of the research. The entire process was overseen by an international expert (UNAIDS staff, in kind contribution) who had a mission to Moldova in December 2016. The draft Stigma Index methodology and protocol were successfully developed. Subsequently, the MOH Ethical committee and the specialists from the left bank of the Nistru River provided their approval for the research.

This is the second round of Stigma Index study for the right bank of the Nistru River. The questionnaires in Russian and Romanian were also adjusted. This time, as the Transnistrian region (left bank) was covered as well, the sample will be representative for the entire territory of the Republic of Moldova and for each bank separately. This will allow the findings to be promoted on the left bank and the recommendations to be implemented in the region. The sample of the research included around 750 persons living with HIV or about 10% of this population (around 450 persons on the right bank and around 250 persons on the left bank). The period for data collection was beginning of June – end of November 2017. For data collection, 7 sites (5 on the right bank and 2 on the left bank) were opened and 21 interviewers, PLWH, were involved. Currently, the data is processed and analyzed by an independent consultant from a center for sociological research, CBS AXA. Two separate reports, one for each bank, will be developed by the end of April 2018.

The data will be further presented in 2 workshops on the both banks, and working plans to reduce stigma and discrimination will be developed.

In the period December 2016 – December 2017, four substantive awareness campaigns were conducted on both banks of the Nistru River:

1. World AIDS Day 2016;
2. AIDS Candlelight Memorial Day 2017;
3. World Drug Day 2017;
4. World AIDS Day 2017.

The implementing partner for all of the above-mentioned campaigns was the NGO “Positive Initiative” with the direct involvement of all regional partners (14 NGOs, 4 regional social centers for people living with HIV and all envisaged ministries).

The first campaign dedicated to World AIDS Day 2016 aimed at informing the society on the importance of HIV testing, fighting stigma and discrimination and breaking the stereotypes about HIV and people living with this disease. Events were held throughout the Republic of Moldova, including the Transnistrian region, with more than 19,000 people informed, including about 5,000 in the Transnistrian region (around 2,100 drivers).

The activities were launched through an interactive online press-conference, including a person living with HIV open status. Twenty well-known personalities through visual banners (3 banners designed specifically for the Transnistrian region and 3 for the right bank) called people in seven big cities to take the test for HIV. The people covered by the campaign were reached through different activities among which: 25 information sessions for youth, 10 meetings with the communities of people living with HIV, 4 thematic round tables with local public authorities and people living with HIV, and an intellectual game IQUIZ. The Red Ribbon Gala Awards organized in Chisinau gathered around 300 invitees and provided awards to 3 young people and 3 people living with HIV who were the winners of the essay contest. The participants of the show “The Power of Dance” joined the event and ensured that the message on tolerance related to HIV is spread by VIP persons. During the event, more than 45,000 MDL were collected to cover the needs of pregnant HIV women all over the country – around 200 HIV mothers. The campaign was covered by over 24 media channels.

“Ending AIDS Together” was the theme for the 2017 Candlelight Memorial which took place on the 21st of May. About 34,700 people received information on HIV/AIDS during the campaign, of which 10,000 in the Transnistrian region (including 2,000 drivers).

At the entrance of the institutions that joined the campaign, including the UN House, staff and visitors received red ribbons, flyers and informational keyrings. Also, representatives of these entities (including the Ministry of Health, Labor and Social Protection, the Ministry of Justice, the UN agencies, the Department of Penitentiary Institutions, the General Police Inspectorate, the Institute of Neurology and Neurosurgery, Dermatovenerology and Communicable Diseases Hospital and others) participated in the “Ending AIDS together!” flash-mob. They took individual and group photos, holding the letters of the “Ending AIDS together!” slogan. During a flash-mob called “Commemoration Light” dozens of police cars, fire trucks and emergency vehicles placed in letters to form the slogan STOP AIDS connected the flashing and warning lights, while a few hundred people laid lights on a huge ribbon. During the outdoor activity called “I know. I Support. I join”, those who wanted could take rapid HIV, hepatitis C and syphilis tests. A total number of 137 people were tested (hepatitis C was detected in 3 cases and syphilis in one). Some of the windows of the Ministry of Health, Labor and Social Protection were illuminated in red, improvising a ribbon — the symbol of solidarity. At the same time, outreach activities, roundtables, workshops, and Quests for young people, as well as the “Safety Route” event to inform drivers about HIV, took place in over 35 towns on both banks of the Nistru River. During the campaign, 4 public video and audio spots were broadcasted in the municipal public transport and shopping centers. Additionally, street banners were installed in 6 cities displaying the pictures of well-known people who supported the campaign.

The National World Drug Day in 2017 was celebrated via a national awareness-raising campaign on alternatives to punishment for people who use drugs. Under the leadership of UNODC, public dialogues were conducted at the level

on the NDDCC in 7 rayons of the Republic of Moldova, including high level representatives from Justice, Interior, Health as well as NGO and PWUD community representatives. All dialogues were led by UNODC. Furthermore, an opinion pool was organized at the dialogues, and the results show that up to 82% of participants are in favor of alternatives to punishment, including legislative and normative adjustments that this might imply. The campaign had a huge mass-media coverage, with more than 12 TV and radio channels reporting on the campaign. Three 1-hour TV programs devoted their prime time to this topic while inviting campaign organizers, with only human and organizational and no financial costs incurred.

The World AIDS Day campaign in 2017 had the main objective to underline that ending AIDS as a public health threat can only happen if the right to health and quality health services are available and accessible for everyone and leaves no one behind. The campaign has started with the 6<sup>th</sup> National AIDS Conference that gathered together more than 100 participants and experts from different countries: Moldova, Ukraine, Austria and Switzerland. It was a two-day comprehensive event with a lot of useful, evidence-based presentations during the plenary and parallel sessions. The agenda was focused on achieving the UNAIDS global targets 90-90-90.

The conference ended with an advanced resolution that underlined the next steps for an effective national HIV response and with the traditional Red Ribbon Gala Awards 2017. Four “positive champions” who publicly disclosed their HIV status and three representatives of the business sector that supported the HIV cause were awarded. During the campaign, numerous awareness and testing events were organized in 14 cities from the both banks.

**Indicator based performance assessment**

Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance with Planned Target (if any)	Source of Verification
<b>Component 1 - Discrimination and social inclusion of children and adult persons with disabilities</b>			
<p><b>Output 1.1</b>            a) <i>De facto</i> authorities of central and local level, ombudsperson's office, other specialized de facto authorities and institutions trained and capacitated on international standards with regard to rights of persons with disabilities            b) <i>De facto</i> normative framework reviewed and adjusted – to the furthest possible extent – in line with the international standards with regard to rights of persons with disabilities (as amendments to de facto laws, regulations and/or as executive order, operational guides, etc.)</p> <p><b>Indicator 1.1.1</b>            - No. of responsible officers and professionals (of which % of women) capacitated in applying international standards with regard to rights of persons with disabilities  <b>Baseline:</b>            - 0 responsible officers and professionals (of which 0 women) capacitated in applying international standards with regard to rights of persons with disabilities  <b>Planned Target:</b>            - At least 100 responsible officers and professionals (of which at least 60% - women) trained and capacitated in applying international standards with regard to rights of persons with disabilities</p>	<p>61 responsible officers and professionals trained and capacitated in applying international standards with regard to rights of persons with disabilities and provision of social services for them.</p>	<p>The difference from the achieved results and target will be covered in the follow-up period, as the capacity building activities are still ongoing.</p>	<p>Lists of training participants</p>
<p><b>Indicator 1.1.2</b>            - Existence of policy and normative framework compliant with UN standards on persons with disabilities (to be measured through a study on this framework at the very first stage of project implementation)  <b>Baseline:</b>            - No policy, normative and institutional framework for implementation of rights of persons with disabilities compliant with UN standards on persons with disabilities  <b>Planned Target:</b>            - Policy and normative framework in place – to the furthest possible extent – (at minimum soft – Strategy/roadmap and/or guidelines endorsed by the <i>de facto</i> authorities)</p>	<p>5 normative acts reviewed and proposals for amendments to comply with CRPD developed.</p>		<p>Consultant report</p>

<p><b>Output 1.2</b></p> <p>a) Organizations of women and men with disabilities empowered to take action in protection and advancement of non-discrimination and their fundamental human rights as per the international standards and establish close collaboration with the similar organizations from the right bank of the Nistru River</p> <p>b) Women and men, as well as children with disabilities from the pilot 1-2 communities have access to a range of inclusive CRPD-compliant community services</p> <p><b>Indicator 1.2.1</b></p> <p>- No. of empowered organizations of women and men with disabilities</p> <p><b>Baseline:</b></p> <p>- 1 empowered organization persons with disabilities (“World of Equal Opportunities” from Bender)</p> <p><b>Planned Target:</b></p> <p>- 5 empowered organization persons with disabilities (in addition to the “World of Equal Opportunities” from Bender)</p>	<p>Representatives of 19 NGOs and initiative groups have been involved in the activities of the programme and started cooperating with their counterparts from both banks of the Nistru River;</p> <p>1 NGO from the Transnistrian region have submitted an alternative report to the Committee on Economic, Social and Cultural Rights.</p>		
<p><b>Indicator 1.2.2</b></p> <p>- Establishment of the regional alliance of persons with disabilities</p> <p><b>Baseline:</b></p> <p>- No regional alliance of persons with disabilities</p> <p><b>Planned Target:</b></p> <p>- One regional alliance of persons with disabilities established</p> <p><b>Indicator 1.2.3</b></p> <p>- No. of community-based services for persons with disabilities developed</p> <p><b>Baseline:</b></p> <p>- 1 community-based service/mechanism for persons with disabilities developed (Accessibility Review within the Bender City Constructions Approval Committee)</p> <p><b>Planned Target:</b></p> <p>- 5 community-based services/mechanisms for persons with disabilities developed (in addition to the Accessibility Review within the Bender City Constructions Approval Committee)</p> <p><b>Indicator 1.2.4</b></p> <p>- No. of persons with disabilities (% of women and girls) enjoying the developed community-based services</p> <p><b>Baseline:</b></p> <p>- 0 persons with disabilities (% of women and girls) enjoying the developed community-based services</p>	<p>19 representatives of NGOs and initiative groups, of which 13 from the left bank, have agreed to cooperate in the framework of the Platform for Sustainable (Community) Development.</p>		<p>MoU signed</p>

<p><b>Planned Target:</b> - 50 persons with disabilities (of them 60% women and girls) enjoying the developed community-based services</p>			
<p><b>Output 1.3</b> a) Raised awareness among broader range of opinion and decision-makers (de facto MPs, local authorities, media, etc.) and wider society about the rights-based concept of disability</p> <p><b>Indicator 1.3.1</b> No. of region residents covered by awareness-raising activities</p> <p><b>Baseline:</b> 0 region residents covered by awareness-raising activities</p> <p><b>Planned Target:</b> At least 100,000 region residents covered by awareness-raising activities</p>	<p>More than 70,000 of region residents covered by TV materials produced on the rights of PwDs;</p> <p>At least 16,000 of region residents covered by articles published in local newspapers on the programme's activities and rights of PwDs;</p> <p>266 persons follow the programme's Facebook page.</p>	<p>The difference from the achieved results and target will be covered in the follow-up period, as the awareness-raising activities are still ongoing.</p>	<p>Media outlets coverage information Facebook page</p>
<p><b>Component 2: Enhancing gender equality and combating violence against women</b></p>			
<p><b>Output 1</b> The new created services help the women – victims of DV and/or HT and their children, to break the wheel of violence</p> <p><b>Indicator:</b> Victims of Domestic Violence and Human Trafficking (HT) from Transnistrian region have improved access to complex social reintegration/rehabilitation service, including one shelter and two regional hubs</p>	<ol style="list-style-type: none"> <li>1. The <b>temporary shelter is functional</b> and continues to provide assistance in most complicated cases of Domestic Violence from the Transnistrian region;</li> <li>2. <b>Two regional hubs in Slobozia and Grigoriopol</b> ensure outreach to local communities, identifying, assisting and referring cases of domestic violence;</li> <li>3. The <b>reconstruction works</b> of the new, permanent shelter started with the financial support of the EU and the Government of Sweden.</li> <li>4. The <b>continuity of the assistance process for the victims of domestic violence</b> has been ensured through signing amendments to the grant agreements with the selected partner NGOs, covering the following period November 2017- May 2018.</li> <li>5. Since the establishment of the <b>services to assist victims of domestic violence</b>, namely the temporary shelter located in Bender and the regional centers in Grigoriopol and Slobozia, assisted and oriented 1,065</li> </ol>	<p>As in 2014, local authorities from the Transnistria region were not able to identify a location to be used as a permanent shelter, an intermediary solution was proposed, namely to rent a house to provide services of a temporary shelter, until the building for permanent services will be identified, refurbished and commissioned to the local partner. Starting with February 2015, services of the temporary shelter and assistance is provided to the victims of Domestic Violence and their children, in a residential regime.</p>	

	<p>people, of which 946 were women, 96 children and 23 men, as follows:</p> <ul style="list-style-type: none"> <li>• 606 women were informed about the phenomenon and consequences of domestic violence, as well as about existing services;</li> <li>• 459 people received at least one service or more;</li> <li>• 178 persons received legal services;</li> <li>• 311 persons received psychological services through 1659 consultations;</li> <li>• 62 beneficiaries were oriented professionally by the psychologists from the temporary shelter and regional hubs;</li> <li>• 29 people were professionally trained;</li> <li>• 44 people were employed.</li> </ul>		
<p><b>Baseline:</b> 1 Lack of services (unities) for assisting victims of DV and HT</p> <p><b>Indicators:</b> 1.1. Number of created services (unities) 1.2. Exact types of created services in the units 1.3. Number of partnerships with local NGOs for transfer of the management of the Shelter and regional hubs</p> <p><b>Planned Target:</b> 1.1.1. 1 effectively established, functional and capacitated Residential Women Center (Shelter) &amp; Women’s Safety &amp; Prevention Services (non-residential) in Tiraspol with functioning regulations and rules for social reintegration services</p> <p>1.1.2. 2 effectively established, functional and capacitated regional hubs Women’s Safety &amp; Prevention Services (non-residential) in Grigoriopol and Rabnita</p> <p>1.3.1. Partnerships created with 2 NGOs in order to transfer the management of the Shelter and the 2 hubs</p>	<p>1.1.1.1. On track. The temporary shelter will work until the permanent one is established;</p> <p>1.1.1.2. On track. The permanent shelter is under construction. Estimated date of commissioning is June 2018;</p> <p>1.2.1.1. Target reached. Two regional HUBs (one in Grigoriopol and one in Slobozia) have been established.</p> <p>1.3.1.1. Target is reached. Two Grant Agreements with left bank NGOs have been signed.</p>		

<p><b>Output 2</b> Increased number of professionals contribute to diminish the consequences of Domestic Violence and Human Trafficking (HT) phenomena</p> <p><b>Indicator:</b> The presence of professionals (in shelter, in two regional hubs, in services managed by other local NGOs) who can deliver qualitative services for victims of DV and HT</p>	<p>The activities under the output 2, related to strengthening the capacities of local professionals were adjusted to better meet the local needs.</p>		
<p><b>Baseline:</b></p> <p>2. Lack of trained specialists, specifically case managers, psychologists, social workers, lawyers, PR specialists from the shelter, regional hubs and other local NGOs to deliver qualitative services for victims of DV and HT.</p> <p><b>Indicators:</b></p> <p>2.1. Number of specialists from service delivery institutions (shelter, regional hubs, other partner NGOs, representatives of de-facto ministry) trained</p> <p><b>Targets:</b> 2.1.1. Capacities strengthened through trainings to 15 professionals from specialized services of the key service delivery partners</p>	<p>2.1.1.1. Target on track to be achieved.</p>		
<p><b>Output 3</b> Created opportunities are in line with the victims needs and contributes to economic empowerment of the survivors/victims</p> <p><b>Indicator:</b> Enhanced opportunities for, victims of DV and HT to attend the labor market</p>	<p>Within the vocational orientation process, three training software packages for vocational and educational training (VET) and labor market activities are used. Based on the professional courses, most of the beneficiaries were employed on the local market as seller-cashier, manicurist, hairdresser, cook-confectioner, bank cashier-operator, and administrative assistant.</p>		
<p><b>Baseline:</b></p> <p>3. Lack of specialists (social workers, psychologists), who applies vocational counselling techniques and tests</p> <p><b>Indicators:</b></p> <p>3.1. Number of psychologists trained to use vocational counseling techniques and psychological tests for career counselling and planning</p> <p>3.2. Number (80) of victims professionally oriented</p> <p>3.3. Number (20) of women who graduated VET courses</p> <p>3.4. Number (40) of women employed</p>	<p>Target is reached. Thanks to the intervention of economic programme, 62 beneficiaries were oriented professionally by the psychologists from the temporary shelter and regional hubs, 29 people were professionally trained and 44 people were employed.</p>		

<p><b>Targets:</b>  3.1.1. Capacity of partner NGOs developed to implement economically oriented programs for victims of DV and HT, including 5 trained psychologists  3.2.1. 80 victims professionally oriented  3.3.1. 20 women graduated vocational courses  3.4.1. 40 of women employed</p>			
<p><b>Output 4</b> Public awareness raised to support prevention/disclosure of DV and HT cases  <b>Indicator:</b> The information and public awareness campaign produced effects among the general public, and generated public debate</p>	<p>The activities under the output 4 related to implementing an awareness campaign, were adjusted to better meet the local needs.</p>	<p>After two competitions, carried out in the first half of 2017, the limited number of received offers suggested that media campaigns through social networks is still premature on the left bank, and the NGO sector does not yet require support for such information tools.  It has been proposed to adjust the activities within this sub-area by strengthening capacities of regional hubs, to ensure better information of citizens from remote areas. It has been assessed that the local awareness campaign can be better implemented through the two regional HUBs created within the project, which have a good outreach and which undertake frequent field visits through their mobile teams.</p>	
<p><b>Baseline:</b> 4.1. Domestic Violence – a hidden social problem  4.2. Relatively high tolerance of Domestic Violence phenomena among society  4.3. Lack of public debates regarding Domestic Violence phenomena.  <b>Indicators:</b>  4.1.1. Number of awareness raising activities carried out  4.1.2. Number of NGOs, trained to develop local campaigns  <b>Targets:</b>  4.1.1. Support the organization of awareness raising campaigns and joint events (involving the right bank) on DV and HT - 5 awareness raising activities carried out  4.2.1. Empower 5 NGOs to develop local mid-term plans to prevent DV  4.3.1. 5 NGOs trained to develop local campaigns</p>	<p>4. Target on track to be achieved.</p>		

**Component 3 - Improving prevention, treatment and care services for PLHIV, PWIDs and people in prisons**

<p><b>Output 1. Increased access to comprehensive package of services for PWIDs, including drug dependency in community</b></p> <p><b>Indicator 1.1</b> 10 specialists participated at the working visit on HIV/OST to Minsk  <b>Baseline:</b> Weak understanding of OST benefits among decision makers on both banks  <b>Planned Target:</b> 10 Authorities and relevant specialists have increased knowledge on addressing public health policies on drug use</p> <p><b>Indicator 1.2</b> A report including normative document adjusted to incorporate OST is prepared  <b>Baseline:</b> Lack of normative acts to incorporate OST on the left bank  <b>Planned Target:</b> A clear normative health treatment related regulation/ordinance in place on the left bank to enable OST, including basic guidance for medical specialists (Clinical Protocol) implementation</p> <p><b>Indicator 1.3</b> Targeted capacity building of 7 drug dependency and infectious diseases specialists from both banks to ensure piloting and scaling up of drug dependency treatment on both banks  <b>Baseline:</b> Lack of knowledge and skills of health and NGO staff to provide OST on both banks of Nistru  <b>Planned Target:</b> All staff (at least 7 persons) skilled to provide OST in the new 4 OST sites (2 on left bank and 2 on right bank)</p> <p><b>Indicator 1.4</b> Ensure adequate functioning of the new 4 OST sites by providing equipment  <b>Baseline:</b> No OST available on the left bank. OST in partly available on the right bank  <b>Planned Target:</b> 4 new sites (2 on left bank and 2 on right bank) available and including 4 medical personnel trained to provide OST in the new opened sites</p>	<p>1.1 Achieved;</p> <p>1.2 In progress;</p> <p>1.3 In progress;</p> <p>1.4 Achieved partially 3 OST sites were opened on the right bank, including in Rezina, on the border with the facto territory.</p>		<p>Photos, list of participants, list of tickets</p>
<p><b>Output 2 Increased access to HIV services for 2000 prisoners</b></p> <p><b>Indicator 2.1</b> Assessment report shared with the prison authorities  <b>Baseline:</b> Lack of needs assessment of HIV response in prisons  <b>Planned Target:</b> Conduct the assessment in comprehensive package of services to HIV in TN prisons to identify major challenges and adjustments (including on the normative framework)</p>	<p>2.1 Target achieved. Assessment conducted. Report in English and Russian submitted;</p>		<p>Report, photos and list of participants</p>

<p><b>Indicator 2.2</b> 20 NGO and prison staff trained in comprehensive services to HIV in prisons  <b>Baseline:</b> Weak integrated HIV and TB skills of prison and NGOs staff  <b>Planned Target:</b> Improved the capacities of 20 Health and NGOs staff in providing qualitative integrated TB and HIV services for inmates</p> <p><b>Indicator 2.3</b> 6 prison staff who participated at the working visit on comprehensive package of services in prisons to Switzerland  <b>Baseline:</b> Limited knowledge of prison staff regarding the comprehensive of services  <b>Planned Target:</b> Increased understanding of 6 decision making staff with regards to integrated services in prisons as a result to best practices exposure in Switzerland</p>	<p>2.2 Overachieved (25 participants);</p> <p>2.3 In process.</p>		
<p><b>Outcome 3. Existent HIV programming policies are human rights based and gender sensitive, including M&amp;E frameworks and budgets</b></p> <p><b>Output 3: Human rights and gender mainstreamed into HIV normative framework on both banks</b></p> <p><b>Indicator 3.1</b> Number of gender assessment performed and implemented  <b>Baseline:</b> Lack of gender assessment of HIV policies on the left bank.  <b>Planned Target:</b> No (1) gender assessment of HIV response, present (baseline 1 – on the right bank) by end 2016</p> <p><b>Indicator 3.2</b> Number of specialists from NGOs and public sector able to develop gender and HR sensitive policies  <b>Baseline:</b> Lack of competencies to develop gender sensitive policies in HIV response  <b>Planned Target:</b> No (25) specialists from both banks of Nistru River able to develop HIV gender sensitive policies and integrate HR&amp;gender base approach in HIV normative framework</p> <p><b>Indicator 3.3</b> Number of HIV working plans for 2017-2018 on both banks of Nistru River gender sensitive</p>	<p>In progress</p> <p>Achieved. The report developed for the adjustments of the normative framework has fully integrated gender-sensitive issues and recommendations developed for the new legal acts are recognized as gender-sensitive. The first seven documents were aligned to international human rights and gender standards and draft adjustments were developed, particularly related to travel restrictions, exclusion of HIV from the list of most dangerous diseases, restrictions related to work and regular check-ups, RH, child protection and the right to adopt children, criminal liability for donors.</p> <p>Achieved. 30 specialists from both banks trained to develop HIV gender sensitive policies and integrate HR&amp;gender base approach in HIV normative framework.</p> <p>In progress. Study visit in Sweden is planned for the middle of May 2018.</p>		<p>Conclusions of the OHCHR and UNAIDS Human Rights Adviser.</p>

<p><b>Baseline:</b> Lack of skills to provide HR and gender sensitive services on both banks</p> <p><b>Planned Target:</b> Nr (10) specialists skilled to promote gender sensitive plans implementation as a result of the study visit</p>	<p>The aim of the visit is to expose the national partners, including those from Transnistrian region to the best practice on implementing the 90-90-90 strategy; as well as gender mainstreaming into HIV practices. The change related to a organizing a study visit to Ukraine to Sweden was coordinated and agreed during the meeting of the project board, on 5th of December 2017.</p>		
<p><b>Outcome 4. Improved capacities of NGOs to provide HIV testing and normative framework ensured for the service</b></p> <p><b>Output 4: Increased access to communitarian testing of most at risk populations</b></p> <p><b>Indicator 4.1</b> Number of NGOs representatives able to provide qualitative HCT (HIV communitarian testing).  <b>Baseline:</b> Weak knowledge and skills of NGO service providers to realize communitarian testing  <b>Planned Target:</b> (30) NGOs representatives able to provide communitarian testing on both banks</p> <p><b>Indicator 4.2</b> Number of specialists exposed to best HCT practices  <b>Baseline:</b> Weak abilities of NGO sector to ensure sustainability of communitarian testing  <b>Planned Target:</b> No (8) specialists exposed to best HCT practices from the region through a study visit to Baltic states</p> <p><b>Indicator 4.3</b> Number of NGO personnel who are able to get funds from public resources  <b>Baseline: 0</b>  <b>Planned Target:</b> (25) management staff of NGOs have fundraising skills</p> <p><b>Indicator 4.4</b> % of waste safely managed  <b>Baseline: 0</b>  <b>Planned Target:</b> 100% of waste managed safely on the right bank</p>	<p>Achieved. A number of 30 specialists able to provide communitarian testing on both banks after a set of two trainings.</p> <p>In progress. A study visit is planned to Paris, 4-5th of April 2018 with the aim to become knowledgeable of Pre-exposure prophylaxis implementation. It is a very new intervention in Moldova, the implementation of which was approved at the beginning of 2018. The change from a Baltic country to France was coordinated and agreed during the meeting of the project board, on 5th of December 2017.</p> <p>Achieved. A modern waste management medical equipment procured and installed in Balti, at NGO UORN. Currently is functional.</p>		

<p><b>Output 5 LEAs participate in referral process of vulnerable groups to harm reduction services</b></p> <p><b>Indicator 5.1</b> 10 LEAs participated at working visit on Police Referral Services to Vienna, Austria  <b>Baseline:</b> Lack of knowledge of LEAs related to comprehensive HIV/TB/ OST prevention package  <b>Planned Target:</b> 10 LEAs are sensitized in the field of Harm Reduction and referral services as a result of exposure to best practice LEAs communitarian approach in Austria</p> <p><b>Indicator 5.2</b> 25 police officers trained in Harm Reduction and personal security and safety.  <b>Baseline:</b> Lack of normative guidance for LEAs to address public health needs of PWID  <b>Planned Target:</b> 20 LEAs are capacitated and have the necessary skills to ensure referral to Harm Reduction and personal safety and security while interacting with the vulnerable groups</p> <p><b>Indicator 5.3</b> Regulation developed and approved to incorporate safety and security at the work place and referral schemes to Harm Reduction for police officers  <b>Baseline: 0</b>  <b>Planned Target:</b> 1 Normative document developed and approved to incorporate safety and security at the work place on the left bank and referral schemes to Harm Reduction for police officers</p>	<p>5.1 Achieved</p> <p>5.2 Over-achieved 50 police and 10 NGO specialists</p> <p>5.3 In progress. Consultants contracted. Memorandum between NGOs and police signed on the left bank.</p>		<p>List of participants, photos, tickets</p>
<p><b>Outcome 6: Stigma and discrimination of the PLWH decreased</b></p> <p><b>Output 6: HIV and drug dependency related stigma and discrimination reduced</b></p> <p><b>Indicator 6.1</b> Number of reports on stigma index  <b>Baseline:</b> Lack of Stigma index research on the right bank  <b>Planned Target:</b> Stigma Index conducted (2016)</p> <p><b>Indicator 6.2</b> Number of population covered by the campaign  <b>Baseline:</b> High level of stigma and discrimination towards HIV on both banks which impede persons to exercise their rights  <b>Planned Target:</b> At least 5,000 Persons covered by communication campaigns</p> <p><b>Indicator 6.3</b> Number of staff tolerant towards beneficiaries.  <b>Baseline:</b> High level stigma among health personnel providing services to HIV affected or infected persons  <b>Planned Target:</b> 200 health personnel providing HIV prevention, treatment and care services tolerant to their beneficiaries</p>	<p>In progress. Data collection finished. Reports will be developed by the end of April 2018.</p> <p>Achieved. More than 60000 persons covered during four large informative campaigns.</p> <p>Health workers (about 200) were part of May 2017 campaign “Ending AIDS together”, calling for 0 (zero) Stigma and discrimination. The following entities adhered to it: Ministry of Health, Ministry of Social Protection</p>		

	and Family, Ministry of Justice (health department), Department of Penitentiary Institutions, General Police Inspectorate, Dermatology and Communicable Diseases Hospital, The Institute of Neurology and Neurosurgery, TB Institute.		
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## **Enhancing Women’s Political Representation through Improved Capacity and Enhanced Support in Moldova**

### ***Programme overview***

The Programme “Enhancing Women’s Political Representation through improved capacity and enhanced support in Moldova” (WiP Programme) is implemented jointly by two UN agencies – UN Women and UNDP – in partnership with two non-governmental organizations (NGOs) - East Europe Foundation (EEF) and the Center Partnership for Development (CPD). The programme was funded by the Government of Sweden. The initial period of implementation was July 2014-December 2016 with the overall budget of USD 2,934,979.. Following agreement with the Embassy of Sweden, a one-year cost extension of the Programme has been granted for the period January-December 2017, with a budget increase to USD 3,485,690.

The overall goal of the WiP Programme is to support the increased participation of women in politics and in the decision-making process by creating an environment conducive to their meaningful participation, and to support capacity development of women before, during and after the elections at the central and local levels. The Programme also seeks to promote increased public awareness of women’s contribution to political leadership and supports the realization of women’s rights and commitments undertaken by the Government of Moldova. It has two expected outcomes: Outcome 1: Legal frameworks and policies to advance women’s right to participate in decision making at national and local levels are reformed/adopted and/or implemented. Outcome 2: Gender equality advocates influence legal frameworks and policies to increase women’s leadership and political participation.

### ***Results***

#### **Outcome 1: Legal frameworks and policies to advance women’s right to participate in decision making at national and local levels are reformed/adopted and/or implemented.**

The Programme contributed to strengthening the capacities of the civil society Gender Equality Platform since it was established. The Platform was instrumental in the adoption of the Law No. 71 (legalization of a gender quota in the Republic of Moldova) and has been recognized as a key actor in supporting Government efforts on gender equality, which is demonstrated by their inclusion as a partner in the new National Strategy on Advancing Gender Equality (2017-2022) approved by the Government in April 2017.

Despite the adoption of the gender quota, one of the major constraints is the perceived lack of political party leaders to adopt placement requirements. This still provides the leadership of political parties with the possibility to place 40% of women on the bottom of the candidates’ lists.

Another significant constraint that may jeopardize the application of the adopted gender quota in the 2018 parliamentary elections is the change of the electoral system<sup>1</sup> for the Parliament from a proportional to a mixed electoral system. Under such circumstances, the consolidated voice of the civil society and development partners will have to be more present at the local level, encouraging local branches of political parties to nominate more women in single member electoral districts. An additional limitation that may endanger the 40% quota in the Government composition is the new Law on Government adopted in July 2017<sup>2</sup>.

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<sup>1</sup> The changes to the electoral system were introduced in July 2017 by Law No. 154.

<http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=370943>

<sup>2</sup> <http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=370935>

*Output 1.1: Capacity at national and sub-national levels to develop and implement legal frameworks and policies to advance women's right to participate in decision making enhanced.*

One-one advocacy with key decision-makers took place during numerous meetings organized at the initiative of CSOs in the course of the year and during meetings held with UN representatives. Decision-makers from both Government (Prime Minister, Minister of Labor, Social Policy and Family) and Parliament (Speaker, Deputy Speaker of Parliament, MPs) were targeted.

The advocacy on TSM's adoption and further on the promotion of the newly adopted legal provisions has been carried out through TV public debates with political parties, TV shows and press conferences. Ten (10) TV spots on promoting gender quotas in politics and in the decision making, presenting the best practices examples of the states, which have already adopted the quotas, as well as TV spots on promoting the legislative innovations have been broadcasted on the national and regional TV channels.

The Gender Equality Platform (GEP) seized all the opportunities to advocate for TSM including through public forums, position papers, declarations, press conferences, press clubs and public actions in front of the Parliament.

The public at large became more aware about the stereotypes existing in the society on women's involvement in politics and about the positions and profiles of women and men candidates elected at the local level due to the findings of a comprehensive research "Gender Equality Barometer" launched in May 2017.

Main findings and legislative changes were illustrated in infographics in three languages and widely disseminated via media and public events<sup>3</sup>.

Women in Politics Programme focused specifically on the area of combating sexism in advertising and media, in partnership with the MHSPF and the Association of Advertising Agencies (AAPM). The legislation in the field of sexism in advertising and social advertising has been reviewed and relevant amendments have been proposed in order to correlate the national legal framework to the international standards. A Guideline<sup>4</sup> to assess sexism in advertising has been developed and published. The draft Regulation for the establishment and functioning of the Experts' Council in the field of advertising, with a special focus on sexism in advertising, was debated in a series of roundtable discussions and workshops with the participation of an international expert.

In 2017, the Programme also conducted a policy review of the legal framework concerning the incompatibility requirements that are applied to local elected officials (mayors, local, municipal and rayonal council persons). Given that most of the women involved in local politics come from the education/social care fields while men have a business background, the incompatibility provisions are expected to have a more disproportionate effect on elected women.

*Output 1.2: Capacities at all levels to promote women's participation in electoral processes both as candidates and voters enhanced.*

Over 10 organizations supporting women candidates and demanding women's equal participation within political party nominations have been receiving capacity development support (7 political clubs established in 7

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<sup>3</sup> <http://md.one.un.org/content/unct/moldova/ro/home/presscenter/press-releases/barometrul-de-gen-cum-particip-femeile-i-brbaii-in-politic-i-in-/>

<sup>4</sup> <http://www.aapm.md/rus/rukovodstvo-po-otcenke-seksizma-v-reklame.html>

districts, 3 women's organizations of 3 political parties, Romani Women and Girls Network, Gender Equality Platform consisting of 30 organizations).

Significant effort was invested to identify women candidates for local elections through nomination campaigns and outreach in the communities. In 2017, 205 women received support and capacity building to efficiently lead in their communities or at their workplace.

The WiP Programme from its very start was designed as a joint collaboration with two prominent human rights and gender NGOs: East Europe Foundation (EEF) and Center Partnership for Development (CPD) that are equal partners with UN Women and UNDP. One of the main objectives of EEF and CPD was to consolidate the platform of NGOs active in the area of gender equality promotion and to use it as a tool of pressure on the stakeholders responsible for TSM adoption. This objective was achieved with the establishment of the Gender Equality Platform in July 2015. Currently, the Platform brings together 30 prominent NGOs and individuals committed to gender equality.

The WiP Programme has further strengthened the institutional capacity of the GEP through supporting its Secretariat function in 2015, 2016 and 2017 and the development of three key documents to guide its work in the upcoming period.

The WiP Programme has made significant contribution to increasing media reporting on positive and inspirational representation of women, as well as challenging public's perceptions on "typical" positions and occupations of women and men. 300 "success stories" of women leaders from different walks of life – politics, business, civil service, civil society, etc. – and from all corners of the country, have been identified and featured on print, on-line and audio-visual media in the course of the year.

An additional 60 success stories about women entrepreneurship were developed and disseminated on different online platforms<sup>5</sup> as well as in a brochure. Fifteen (15) short videos were developed featuring some of the most inspiring women leaders in business.<sup>6</sup> The information about all existing resources for women entrepreneurs is presented on a web platform: [www.platformafemeilor.md](http://www.platformafemeilor.md). Besides this, the journalists involved in the developing of success stories became more aware about how to present women and gender equality topics in a non-stereotypical way, as well as to avoid sexism in language and in photos/ images.

*Output 1.3: Capacities of the Election Management Bodies on gender responsive electoral management enhanced.*

In the course of 2014-2017, the Women in Politics Programme supported the efforts of the Central Election Commission (CEC) and the Center for Continuous Electoral Training (CCET) of Moldova in championing a strong gender perspective in election management and electoral processes. The key areas of cooperation and results are mentioned below.

Prior to the electoral system change in Moldova from Proportional Representation (PR list) to a Mixed Parallel one<sup>7</sup>, the Programme supported the Central Electoral Commission of Moldova (CEC) and the Center for

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<sup>5</sup> Former ealider.md platform integrated within platformafemeilor.md, and AFAM's Facebook page)

<sup>6</sup> <https://www.youtube.com/watch?v=RpH2N7a4A6Y>

<sup>7</sup> 50 Members of Parliament (MP) will be elected in Single Member Districts (SMD) using the First Past the Post (FPTP) system, and 51 through a closed lists PR system. Electoral Code of the Republic of Moldova <http://cec.md/files/files/Legi/Codul%20electoral.pdf>

Continuous Electoral Training (CCET) to inform people in a nonpartisan and inclusive way about all electoral systems and their gender equality implications. Therefore, a total of 69 people (45 women and 24 men) representing 11 CSOs, 10 political parties and 8 media organizations learned about the peculiarities of different electoral systems and the recommended Temporary Special Measures (TSM) that can be applied under each system to advance the representation of women, and other under-represented groups, in politics and decision making.<sup>8</sup> As result of pressure from the WiP supported Gender Equality Platform<sup>9</sup>, specialized international bodies and the society at large, a series of TSM<sup>10</sup> have been introduced in the new electoral law to encourage the nomination of women candidates in Single Member Districts (SMD) , including: (a) 10% increase in the yearly public funding and a multiplication factor for each female candidate elected in a SMD for parties that will put forward 40% of women candidates in the respective constituencies and (b) 50% decrease of the number of signatures required to register a woman candidate in SMD compared to men candidates.<sup>11</sup>

The CEC and CCET have gained international recognition in mainstreaming a strong gender equality perspective in elections (including but not limited to implementation of gender statistics in elections, gender-responsible electoral trainings) and led the establishment of the International Association of Women in Electoral Management – WEM International, which aims at promoting a balanced representation of women and men in electoral management and in decision making processes at large. The Association was registered in Belgium in December 2017.

In 2017, the Programme supported WEM-International in organizing its first international thematic conference as an organization – the Round Table “ Advancing Gender Equality in Elections: best practices”, which brought together over 80 election and gender experts and electoral officials from 9 countries (Moldova, Ukraine, Belarus, Georgia, Romania, Kazakhstan, Latvia, Albania and Azerbaijan).

### **Outcome 2: Gender equality advocates influence legal frameworks and policies to increase women’s leadership and political participation.**

Women’s leadership skills have been enhanced and they have taken a more active role towards solving pressing community problems and advancing gender equality, particularly at the local level. Over 2300 women have been involved in different capacity building activities during 2014 -2017 that enabled them to become more effective leaders. These include, but not limited to: political clubs in 7 districts that serve as knowledge and leadership centers for women before, during and after elections; pioneering mentorship programme that put women local councilors in the lead of 24 community initiatives in areas ranging from health to environment to violence against women; peer-to-peer learning and training sessions for women mayors and women local councilors that have led to them undertaking new initiatives to advance community well-being and good governance, mentorship program for women from communities where women are not represented, etc.

An external evaluation was conducted in 2017 to assess the results of some earlier efforts aimed at challenging the entrenched journalist practice to represent women in secondary or sexist roles and having them more

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<sup>8</sup> Article: Moldova: Enhancing awareness of electoral stakeholders on the gender perspective of different electoral systems” <http://www.bridge-project.org/en/news2/europe-cis/1588-moldova-enhancing-awareness-of-electoral-stakeholders-on-the-gender-perspective-of-different-electoral-systems.html>

<sup>9</sup> Position of the Platform for Gender Equality regarding the draft law no.60 of 14.03.17, on changing the electoral system in Moldova. <http://egalitadedegen.md/en/pozitia-platformei-pentru-egalitate-de-gen-fata-de-proiectul-de-lege-nr-60-din-14-03-17-care-presupune-schimbarea-sistemului-electoral/>

<sup>10</sup> Electoral Code of the Republic of Moldova, Articles 41, para(21) and (22) <http://cec.md/files/files/Legi/Codul%20electoral.pdf>

<sup>11</sup> Ibidem, Article 80, para (1) <http://cec.md/files/files/Legi/Codul%20electoral.pdf>

prominently portrayed as successful politicians, entrepreneurs and opinion leaders. The evaluation showed that the results were not sustained.

*Output 2.1: Capacities of the media on gender responsive coverage of political issues enhanced.*

Public at large became more aware and sensitive about women leadership due to increasing women's portraying in media. Since its launching, WiP Programme organized trainings which involved 93 journalists from various media institutions to build their capacities on gender sensitive reporting.

As a result of the increased sensitivity of participating media and the high visibility ensured of the self-assessment process, a total 37 media so far (29 participating and 8 additional ones) signed a commitment to respecting gender equality principles, specifying concrete steps they will perform.

*Output 2.2: Capacity of gender equality advocates to promote women's leadership and political participation strengthened.*

Throughout the project period, 2014- 2017, a diverse range of initiatives has been undertaken to demand inclusion of women's needs at both national and local levels. These include: Gender Equality Platform, 5 Platforms of women representing women from different groups, 7 women's political clubs, Power mapping and needs assessment in 15 localities with predominant Roma population, GirlsGoIT (Programme contribution to other partners' initiative) , Forum "Partnership for an Inclusive and Prosperous Moldova" , 3 regional workshops for business women, 5 NGOs conducted women's empowerment campaigns at local level, 24 small community initiatives undertaken by women local councilors at first mandate, 7 community small initiatives undertaken by women leaders from 7 communities with zero representation of women in decision making, National Network of Women with Disabilities has been launched, 10 peer-to-peer learning visits in 15 communities (12 headed by women mayors and 3 by men mayors) for women mayors, 3 regional initiatives launched by young Roma women and men, 16 Days Campaign on ending violence against women, including those led by women MPs and women mayors placing the survivors at the center, One of the two Roma women local councilors organized an initiative to encourage Romani women to participate in local council meetings.

One of the two elected Romani woman local councilors (Laura Bosnea) was supported to mobilize the Roma community around key issues they face in the town of Rascani. The councilor carried out a survey with Romani women to probe into their problems. A key problem identified, poor quality of roads, was tackled by Ms. Bosnea in her capacity as a local councilor, and reconstruction works were undertaken.

A follow up to the 2016 capacity building program on leadership, advocacy and gender equality for women from groups that are underrepresented in decision-making processes was implemented in 2017. As part of the program, 39 women with different types of disabilities from across the country (including Gagauzia and Transnistria regions) have enhanced their skills to become actively involved in the civic and political life. Besides enhancing their knowledge, women with disabilities identified the most stringent issues that they face because of their disability and gender.

The National Forum of Women with Disabilities "We have abilities- we want possibilities!" took place on October 23, 2017, with the participation of high-level officials, including the Prime-Minister, several MPs and representatives of the Ministry of Health, Social Protection and Family. The Forum's pinnacle was the launching

of Women with Disabilities' Network, composed of 107 women with disabilities from across the country, with the possibility of membership extension.

In addition, the Programme worked to enable local NGOs to conduct women empowerment campaigns at the local level:

- The organization "Tarna Rom" worked in 8 targeted communities populated by Roma (from Calarasi, Riscani and Hincesti), empowering 102 Roma women to get involved in politics and raised awareness within these communities about the importance of taking part in the elections, by offering them capacity building and information.
- The NGO "Femeia Moderna" trained 210 women in 12 localities from Orhei, Soldanesti and Rezina encouraging them to get involved in politics. As a result, 2 women have been elected as mayors (v. Samascani/ Soldanesti and v. Ciniseuti/ Rezina). 34 elected women (2 mayors, 32 local councilors) enhanced their capacities on local public authority's administration, LPA's functioning and project management.
- The NGO Asociatia Comunitara Pepeni conducted a participatory nomination campaign, empowering 35 women from the respective village to get involved in politics. All 35 women identified after nomination campaign received capacity building to run for elections and were registered as candidates on the political parties' lists.
- Asociatia Comunitara Singerenii Noi facilitated the nomination campaign of 26 women in politics. The grantee facilitated the dialogue between the nominated women and political parties. The suffrage has been followed by a campaign involving women and men in a local development initiative.
- The NGO VESTA encouraged 20 women from the Southern region of Moldova to participate as candidates in the local elections. As a result, 2 women have been elected as mayors and 11 women have been elected as local councilors. The grantee broadcasted 4 TV shows and a spot on gender equality at the BAS TV station from Basarabasca.

With the Programme's continuous support, the Women's Political Club 50/50 continued the coordination of seven regional women's political clubs established in seven regions: Briceni, Strășeni, Telenești, Cimișlia, Cahul Orhei and Soroca, the latter two being regions with newly established clubs. EEF and the Women's Political Club 50/50 facilitated the dialogue and cooperation among elected women candidates in the targeted areas for advancing gender equality and solving community issues.

Over 920 women have been directly involved in activities of the local women's political clubs in seven districts since their establishment, which range from advocacy with local branches of political parties for voluntary quotas, identifying and trying to solve together community problems, raising awareness on the importance of women to participate in political processes, etc. Key results include the implementation of recommendations from Gender Audits carried out by the clubs, under the guidance of the lead NGO WPC 50/50. The gender audits covered 28 communities from 7 districts and represented an important learning experience for the clubs in analyzing key issues, developing recommendations and lobbying for their implementation.

In 2017, the Women in Politics Programme adopted a prominent focus to support women in decision making positions at the local level to become more effective and empowered agents of change driving an inclusive and gender responsive development agenda in their constituencies, in line with the recommendations of the Programme's Final Evaluation completed in 2016. In this context, the WiP Programme provided support in the following areas of assistance that are also included in the CALM Women's Network Strategic Plan for 2017-2019.

In 2017, 86 women mayors at their first mandate (about 47% of total women mayors) enhanced their skills in such areas as gender equality, women's leadership, gender responsive local governance, budgeting (with a focus on gender responsive budget), effective communication, and prevention of sexism and sexist language by participating in a comprehensive capacity building program.

As a follow up to another recommendation of the Programme Evaluation, four women mayors with two plus mandates were appointed as co-trainers for some sessions, therefore conveying the practical aspects of the training sessions based on their own experience and expertise.

*Output 2.3 Capacities of elected women parliamentarians and Councilors to perform the elected official's duties developed and strengthened.*

The commitment of the Parliament of Moldova to advance gender equality, inclusive and participatory governance has increased due to continued dialogue and engagement with constituents, primarily women from marginalized groups. An instrument in this regard were the regional parliamentary forums supported by the Women in Politics Programme and organized in close partnership with the Common Dialogue Platform of Women MPs and the Parliamentary Secretariat through its network of four Territorial Information and Constituency Offices of the Parliament (TIOPs).

Based on the methodology and practice of regional policy dialogue forums on gender issues coined by WIP Programme during 2015-2016, in 2017, the Parliament of Moldova independently organized 5 regional forums on women's political participation<sup>12</sup> and 8 forums on issues related to preventing violence against women, girls and children.

In 2017, the WiP supported Women's Network under the Congress of Local Authorities of Moldova (CALM) organized two high-level advocacy events that united 82 women mayors from all over the country in a dialogue with the Ministry of Education, Culture and Research, Ministry of Labor, Health and Social Protection and 5 Members of the Parliament representing the Public Administration Committee.

After implementation of the mentorship program "INSPIR-O", 27,261 direct and indirect beneficiaries have been reached, which represents 7,8% of population from the targeted communities. 83 community mobilization actions have been carried, with implication of 699 volunteers (467 women and 232 men). Additional financial contribution has been collected to implement 7 small community projects, thus 345,760.54 MDL (19,963.08 USD) has been collected from individuals and 225,500.00 MDL (13,019.63 USD) represents the financial contribution of the local public administration.

Significant tailor-made capacity development in the area of gender equality was provided to all key stakeholders in Parliament – female Members of Parliament (MPs), newly elected as well as those in subsequent mandates, the Parliament Secretariat, including its leadership and staff of the 4 Parliamentary Constituency and Information Offices, Standing Committees.

In 2017, the Women in Politics Programme supported the Parliament of Moldova in acknowledging the winners of a national video-contest among children on the topic of addressing violence against women. The program

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<sup>12</sup> [Press release by Orhei District Council "Role and importance of women's participation in public and political life <http://or.md/index.php/2017/06/26/rolul-si-importanta-femeii-viata-publica-si-politica/>]

provided symbolic gifts for the children and an expert to talk to children about the root causes of violence and gender inequalities in an accessible manner.<sup>13</sup>

In 2017, the Programme made a dedicated effort to advance the use of gender sensitive language in public life and politics in light of divergent views in the society, including among women in leadership positions, fueled by resistance from Academia and some state actors.

The findings of the research have been incorporated into the first ever comprehensive Guide “Non-Sexist Language. Theoretical Fundamentals and Practical Recommendations”, which was developed by the Women in Politics Programme. The publication provides a solid analysis of best and relevant international practices in the area of use of gender-responsive language, particularly in political and public administration contexts, and the recommendations provided are in line with official linguistic publications and official dictionaries of Romanian language.

The Guide will constitute a resolute argument in the efforts to persuade the Academy of Sciences and the Ministry of Health, Labor and Social Protection responsible for the development and enforcement of the National Occupational Classifier to list feminine equivalents for all professions.

In October 2017, Moldova hosted the Regional Conference for Eastern Europe and Central Asia “Parliamentarians for Gender Equality and Women’s Empowerment” organized by UNDP, UN Women and OSCE-ODIHR in partnership with the Parliament of Moldova and with support from the Government of Sweden. Moldova’s gender equality achievements – to many of which the Programme “Women in Politics” had an important contribution – were showcased to over 90 parliamentarians, local elected officials and civil society practitioners from 12 CIS and Central Asia countries.

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<sup>13</sup> Press release Parliament “Winners of video contest awarded in Parliament”

<http://www.parlament.md/Actualitate/Comunicatedepresa/tabid/90/ContentId/3636/language/ro-RO/Default.aspx>

**Indicator based performance assessment**

<u>Planned Indicator Targets</u>	<u>Achieved indicator targets</u>	<u>Reasons for variance with planned target (if any)</u>	<u>Source of verification</u>
<p><b>Outcome 1.</b> Legal frameworks and policies to advance women’s right to participate in decision making at national and local levels are reformed/adopted and/or implemented</p> <p><b>Indicator:</b> Adoption and implementation of appropriate Temporary Special Measures (TSMs)</p>	<p>Pursuant to sustained and joint advocacy, the Legislative package 180 was adopted on 14 April 2016 under the title Law no. 71 on modification and supplementing of some legal acts.</p>		<p><a href="http://lex.justice.md/md/365019/">http://lex.justice.md/md/365019/</a></p>
<p><b>Output 1.1.</b> Capacity at national and sub-national levels to develop and implement legal frameworks and policies to advance women’s right to participate in decision making enhanced</p> <p><b>Indicator 1.1.1</b> Legislative amendments on promoting women in decision making drafted and submitted to the Parliament</p> <p><b>Baseline:</b> Relevant draft amendments to Electoral Code, Party Code, Parliament Law, the Law on Government and Gender Equality Law are developed to promote women in politics and decision making. No initiatives undertaken to develop the secondary legislation to ensure alignment with all other relevant law</p> <p><b>Planned Target:</b> Amendments to Law on Government, and relevant other laws and by-laws drafted in a participatory and transparent manner</p> <p><b>Indicator 1.1.2</b> Political parties receive information/methods to nominate more women</p> <p><b>Baseline:</b> None</p> <p><b>Planned Target:</b> At least all Parliamentary parties receive information on the nomination of more women.</p>	<p>1. <b>Target reached:</b> The Programme has supported advocacy efforts and worked to ensure that legislative Package 180 moves forward in the legislative process. Further support on implementation of legal provisions related to sexism in advertising was provided to MLSPP and draft Regulation for establishment and functioning of Experts’ Council in the field of advertising was prepared.</p> <p>2. <b>Target reached:</b> During 2014-2017, all political parties received information/ methods to nominate more women on electoral lists, as well as to promote more women in decision making positions. In particular, they received 5 resolutions voicing the needs of different groups of women representing different social and professional groups and 7 position papers submitted by CSOs promoting gender equality. During 2016, all political parties received information/ methods about the need to adopt gender equality quota to ensure equitable representation of women in politics, such as 2 flash-mobs, a</p>		<p>Parliament website – Report from session of Parliamentary Committee on Human Rights and Inter-Ethnic Relations;</p> <p>Official gazette publications – official legal web page</p> <p>Resolutions prepared by women from different groups;</p> <p>CSO (CPD and EEF) websites and quarterly reports;</p> <p>Position papers issued and shared by CSOs (CPD, EEF, Gender Equality Platform).</p>

	<p>brief opinion policy note, three position papers, 2 infographics. One infographic developed on main provisions adopted by Law no. 71.</p> <p>3. 3 videos were produced and broadcasted on the main provisions of the LAW 71 on national Tv chan.</p>		
<p><b>Output 1.2</b> Capacities at all levels to promote women's participation in electoral processes both as candidates and voters enhanced</p> <p><b>Indicator 1.2.1</b> Number of Organizations supporting women candidates and demanding women's equal participation within political party nominations received capacity development support <b>Baseline:</b> None <b>Planned Target:</b> At least 10 organizations at the central and local level</p> <p><b>Indicator 1.2.3</b> Percentage of women candidates nominated and running <b>Baseline:</b> Parliament = 27%, Mayors = 17%, Councils = 32%</p>	<p>1. <b>Target exceeded:</b> Over 10 organizations supporting women candidates and demanding women's equal participation within political party nominations have been receiving capacity development support (5 political clubs established in 5 districts, 3 women's organizations of 3 political parties, Romani Women and Girls Network, Gender Equality Platform consisting of 27 organizations).</p> <p>2. <b>Target reached:</b> Total of 949 women received knowledge and tools to be nominated and run for the elections in the framework of</p>		<p>Reports of partnering and target organizations;</p> <p>Report of CSOs and public opinion studies;</p> <p>CPD analysis of political party lists and ranking (Political party Monitoring report);</p> <p>CEC Gender analysis of 2014 and 2015 elections.<sup>19</sup></p>

<sup>19</sup> Infographics "Gender Equality in Elections in the Republic of Moldova" <http://bit.ly/2mo3oJj>

<p><b>Planned Target:</b> increase of 10 pp.</p> <p><b>Indicator 1.2.4</b> Average rank of women candidates decreased in party lists for parliamentary election<sup>14</sup></p> <p><b>Baseline:</b> 60%</p> <p><b>Planned Target:</b> Decrease by 10pp</p>	<p>the Programme. In 2016, over 1,000 women received capacity building on leadership and political participation aimed at enhancing their skills to serve as mayors, as elected or appointed officials at the local level, as well to run as candidates for future elections.</p> <p>3. <b>Slight progress towards target:</b> % of women candidates in Parliament (2014 elections) – 30.30%; Mayor (2015 elections) - 19.3 %; Local Councils (2015 elections) – 34.9%.</p> <p>4. Increase in the placement of women in top 20% of party lists as follows: Parliamentary elections: 2010 - top 20 – 17.4% (places 1-10 – 14.8%; places 11-20 – 20.0%<sup>15</sup>); 2014 - top 20 – 21.15% (places 1-10 - 24%; places 11-20 – 18.3%<sup>16</sup>); Election of local councils: 2011 - top 20 – 5.85% (places 1-10 – 3.7%; places 11-20 - 8%<sup>17</sup>), 2015 - top 20 - 23% (places 1-10 – 18.3%<sup>1</sup> places 11 -20 – 27.7%<sup>18</sup>).</p>		
<p><b>Output 1.3.</b> Capacities of the Election Management Bodies on gender responsive electoral management enhanced</p> <p><b>Indicator 1.3.1</b> Percentage of women members of the CEC and of rayon and precinct level electoral commissions</p> <p><b>Baseline:</b> 1 woman CEC member, 36% women Heads of electoral commissions at rayon level</p> <p><b>Planned Target:</b> At least 1 person increase in the number of women among CEC members and 10 % increase among the Heads of electoral commissions at rayon level</p>	<p>1. <b>Target achieved:</b> Two women have been included in the 2016 CEC composition, both voted in leadership positions- i.e. chair and deputy chair; For 2014 parliamentary elections, women constituted 34.3% among Heads of Electoral Commission at District/rayon Level (DEC) which constitutes an increase of 17% from 2010 elections when women’s share was of 28.6%; for 2015 local elections share of</p>		<p>CEC Annual Report;</p> <p>Voter education materials;</p> <p>Voter turnout sex disaggregated data;</p> <p>CEC Gender analysis of 2014 and 2015 elections<sup>20</sup>;</p>

<sup>14</sup> Candidate rank is measured from the top of the list, such that a lower-rank the candidate is more likely to be elected than a higher-rank one.

<sup>15</sup> Şanse Egale în Procesul Electoral. Studiu de caz: Alegerile parlamentare anticipate din 28 noiembrie 2010, CPD, 2010, Chisinau

<sup>16</sup> Studiu de caz: Alegerile parlamentare din 30 noiembrie 2014", CPD, 2014, p. 20, fig. 7, [http://progen.md/files/6842\\_raport\\_final\\_alegeri\\_2014.pdf](http://progen.md/files/6842_raport_final_alegeri_2014.pdf)

<sup>17</sup> Studiu de caz: Şanse Egale în Procesul Electoral: Cazul Alegerilor Locale 2011, CPD, 2011, p. 20, fig. 15, [http://progen.md/files/8720\\_raport.pdf](http://progen.md/files/8720_raport.pdf)

<sup>18</sup> Şanse egale în procesul electoral. Studiu de caz: alegerile locale generale din 14 și 28 iunie 2015", CPD, 2015, p. 20, figure 10, [http://progen.md/files/7091\\_sanse\\_egale\\_in\\_procesul\\_electoral.pdf](http://progen.md/files/7091_sanse_egale_in_procesul_electoral.pdf)

<sup>20</sup> Ibidem

<p><b>Indicator 1.3.2</b> CEC voter registration and education campaign has a particular focus on women, youth, and on vulnerable groups</p> <p><b>Baseline:</b> No particular focus on women, youth and vulnerable groups in the previous voter registration and education campaigns</p> <p><b>Planned Target:</b> CEC voter registration and education campaign with a particular focus on women, youth, and on vulnerable groups designed and implemented in the general and local elections</p>	<p>women as Heads of Level II DEC was of 29% - a decrease from 36% in 2011. However, progress has been achieved at the levels of women vice-presidents of Level DEC in 2015 – 49% women vice-presidents in 2015 compared to 44% in 2011 - which represents a 11.4% increase.</p> <p>2. <b>Target achieved:</b> 8 CSO-ran voter education campaigns were conducted prior to 2014 parliamentary and 2015 local elections reached a total of 442,096 people including ethnic minority women, women with disabilities, first-time voters, etc. have been encouraged and informed to cast meaningful vote.</p>		<p>CEC website (composition of CEC membership)<sup>21</sup>;</p> <p>CSO reports on voter education campaigns 2014, 2015;</p> <p>Articles/stories on voter education campaigns<sup>22</sup> on UN portals and in media<sup>23</sup>.</p>
<p><b>Outcome 2.</b> Gender equality advocates influence legal frameworks and policies to increase women’s leadership and political participation</p> <p><b>Indicator:</b> Agreed women’s agenda/manifesto on joint platforms amongst Women from communities, community groups, CSOs, think tank organizations and political parties calling for women’s increased participation in politics</p> <p><b>Baseline:</b> not defined</p> <p><b>Planned Target:</b> not defined</p>			<p>Public Opinion survey;</p> <p>Organization’s reports;</p> <p>Media reports.</p>
<p><b>Output 2.1.</b> Capacities of the media on gender responsive coverage of political issues enhanced</p> <p><b>Indicator 2.1.1.</b> Number of media organizations undertaking internal monitoring of gender sensitivity of their product on regular basis before, during and after elections</p> <p><b>Baseline:</b> 17 print and online media organizations</p> <p><b>Planned Target:</b> At least another 20 print, online, audio-visual media</p>	<p>1. <b>Target achieved:</b> Total of 30 media outlets undertook internal monitoring of the gender sensitivity of their products on a regular basis.</p> <p>2. During 2017 <b>37 Media outlets passed through an external evaluation</b> that identified that that not all the commitments</p>		<p>Media monitoring results;</p> <p>Media Association surveys/reports;</p> <p>List of media with signed commitments.</p>

<sup>21</sup> Composition of CEC <http://cec.md/index.php?pag=news&id=1060&l=ro>

<sup>22</sup> Story “Traditional caravans and public debate inspire Roma people to vote” <http://bit.ly/2nvDB1a>

<sup>23</sup> Article “Hop-hop hai la vot” <http://www.timpul.md/articol/hop-hop-hai-la-vot-75670.html>

	<p>undertaken by media outlets were respected.</p>		
<p><b>Output 2.2.</b> Capacity of gender equality advocates to promote women’s leadership and political participation strengthened</p> <p><b>Indicator 2.2.1</b> Number of initiatives undertaken by women and women’s groups, NGOs and media to demand inclusion of women’s needs and priorities in the political party agenda at central and local level</p> <p><b>Baseline:</b> none</p> <p><b>Planned Target:</b> at least 30 initiatives in communities and rayon levels undertaken to identify women’s common needs and interest and demand political parties’ response in their agenda before and after election. The identified needs of women are brought to the central level for the attention of political leaders</p>	<p><b>1. Target exceeded:</b> Diverse range of initiatives have been undertaken to demand inclusion of women’s needs at both national and local levels.</p> <p>These include:</p> <ul style="list-style-type: none"> <li>• Gender Equality Platform</li> <li>• 5 Platforms of women representing women from different groups</li> <li>• 7 women’s political clubs</li> <li>• Power mapping and needs assessment in 15 localities with predominant Roma population</li> <li>• 3 regional workshops for business women</li> <li>• 5 NGOs conducted women’s empowerment campaigns at local level</li> <li>• 24 small community initiatives undertaken by women local councilors at first mandate</li> <li>• 10 peer-to-peer learning visits in 15 communities (12 headed by women mayors and 3 by men mayors) for women mayors,</li> <li>• 3 regional initiatives launched by young Roma women and men</li> <li>• 16 Days Campaign on ending violence against women, including those led by women MPs and women mayors</li> </ul>		<p>CSO reports;</p> <p>Media report.</p>

	<p>placing the survivors at the center</p> <ul style="list-style-type: none"> <li>• One of the two Roma women local councilors organized an initiative to encourage Romani women to participate in local council meetings</li> <li>• GirlsGoIT (Programme contribution to other partners' initiative)</li> <li>• Forum "Partnership for an Inclusive and Prosperous Moldova" (Programme contribution to UN Women initiative)</li> <li>• 86 first time women mayors were trained on gender equality and good governance principles</li> <li>• 39 women with disabilities learned how to run for elections and to demand for their rights</li> <li>• Women from underrepresented groups implemented individual action plans and exceeded the set targets.</li> <li>• 21 Women from 7 communities with zero representation passed through a complex Mentorship program and implemented community initiatives.</li> </ul>		
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<p><b>Output 2.3.</b> Capacities of elected women parliamentarians and councilors to perform the elected official's duties developed and strengthened</p> <p><b>Indicator 2.3.1</b> Number of meetings between MPs and women from rural and urban areas organized</p> <p><b>Baseline:</b> no separate meetings of MPs with women and their organizations. Meetings between MPs and women are held as part of usual routine community meetings that are rarely organized</p> <p><b>Planned Target:</b> 15 rayons will be visited and meetings will be held by MPs with women</p> <p><b>Indicator 2.3.2</b> Number of newly elected women MPs received initial training</p> <p><b>Baseline: None</b></p> <p><b>Planned Target:</b> All newly elected Women MPs trained</p> <p><b>Indicator 2.3.3</b> Number of Women Councilors trained</p> <p><b>Baseline:</b> None</p> <p><b>Planned Target:</b> Women councilors in 10 target rayons trained</p>	<p><b>1. Target achieved:</b> 15 regional parliamentary forums brought together 650 citizens, including 542 women, particularly from marginalized groups located in 41 administrative units of Moldova, including Gagauzia and Transnistria, in direct dialogue with 26 Members of Parliament (12 women and 14 men) and local decision makers around issues important to women.</p> <p><b>2. Target exceeded:</b> All women MPs (those in their first term but also in consecutive terms) have received both training and individual coaching. Other Parliamentary structures received training as well (see Table below)</p> <p><b>3. Target exceeded:</b> 429 women and 35 men first-time councilors from 23 districts/rayons, 1 municipality (Balti) and the Autonomous Territorial Unit of Gagauzia enhanced their capacities in areas of local council functioning, fostering gender equality in local development agenda, finance, fundraising, communication and advocacy.</p> <p><b>4. Target exceeded:</b> 27 women first time councilors from different districts benefited from a pioneering mentorship program.</p>		<p>Media reporting;</p> <p>Annual program report;</p> <p>Contractors/service providers' reports on various capacity building activities for women parliamentarians, Secretariat staffers and women councilors;</p> <p>Parliament web-site/ newsletters;</p> <p>Interactive Map on regional forums – coverage, issues raised.</p>
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## **Contribution to the Confidence Building Measures Program in Transnistria - Health Sector, Phase II**

### ***Programme overview***

In the context of health sector reforms, several significant interventions have been initiated in the area of maternal and child health over the last decade. Affordable and high-quality care has been one of the key issues of the health agenda of authorities to accelerate progress towards Millennium Development Goals (MDG) targets 4 and 5 and to continue the monitoring and evaluation of the achievements as part of the post-2015 agenda. There are specific national health policies and programs focusing on mother and child health. The development of a regionalized perinatal assistance system, strengthening and regionalization of pediatric emergencies and intensive therapy departments, as well as an increase in the level of knowledge through continuous medical training are just some examples of major efforts with sizeable impact undertaken recently.

The implementation of Integrated Management of Childhood Illness (IMCI) and the system of individual evaluation of the neonatal mortality cases allows the collection of relevant data for developing effective interventions. Supporting communities and building a resilient health system is particularly important in the context of the 2030 Sustainable Development Agenda and its related health goal to *ensure healthy lives and promote well-being for all at all ages*. Despite high population coverage of antenatal and hospital care, the quality of health services requires further analysis and improvement. All routine vaccines for children are available, including in the Transnistrian region, but with slower than expected up-take of new vaccines (rotavirus (RV), pneumococcal (PCV)) or reluctance to implement new vaccines in the Transnistrian region due to the dire financial situation. UN has been engaged in the on-going process of improving the quality of care for mothers and children at all levels of health services, and promotes an integrated and comprehensive approach on both banks of the Dniester River.

This initiative is funded by the Swiss Agency for Development and Cooperation (SDC) and is jointly implemented by WHO, UNICEF and UNDP. It is a logical continuation of previous activities undertaken in the Transnistrian region under previous confidence building measures efforts (both EU- and SDC-funded) in the area of mother and child health (MCH) and immunizations since 2013. The overarching goal of this project is to make sure that the population of Moldova, including in the Transnistrian region, has improved health status, financial protection, equitable access to and satisfaction with health services. The ultimate objective is that the population of the Transnistrian region benefits from comprehensive quality health services, with specific focus on Maternal and Child Health (MCH) and immunizations.

### ***Results***

The following three outcomes were defined under the project, with consideration for the supply and demand dimensions:

- Newborns and mothers from the Transnistria region benefit from qualitative integrated perinatal services, including nutrition;
- Vaccine coverage and immunization rates for traditional and new or underutilized vaccines are improved on both banks of the Dniester River; and
- The population on both banks of the Dniester River has increased their MCH-related health literacy related to infant feeding and awareness about availability of MCH services and their right to access them.

### **Outcome 1: Perinatal care services**

Activities under this outcome focus on strengthening the quality of health care services at all levels rendered to mothers, newborns and children. This is being accomplished through actions in three key areas:

- High quality MCH care services available at hospital health care level;
- High quality MCH services available at ante- and postnatal care levels, including home visiting; and
- Updated breastfeeding knowledge and competences gained by health care professionals (primary and hospital care levels) and community.

*Output 1: Specialized health professionals in the Transnistria region (obstetricians, midwives and neonatologists) have improved capacities and knowledge to provide MCH hospital care according to international standards*

Following the **Effective Perinatal Care (EPC)** missions to the Transnistria region conducted between 2014 and 2016, WHO undertook an EPC training in Chisinau on *30 May – 8 June 2017* for 24 people overall (23 females, 1 male), divided into teams of three (obstetrician, neonatologist, midwife), including 8 professionals from the Transnistria region. The training course was facilitated by the WHO experts. Two EPC follow-up missions were organized back to back to both banks of the River during *16-27 October 2017* to track progress on the implementation of former recommendations. Mission members included WHO experts and WHO staff and featured field visits to maternities from selected venues and resulted in action plans for knowledge improvement for each of the visited facilities.

A study visit to the **training center on perinatal care emergencies** in Kaunas, Lithuania, was organized on *27 June – 1 July 2017*, including a study visit to the Department of Obstetrics and Gynecology of the Lithuanian University of Health Sciences ‘Kauno Klinikos’ on *28–30 June 2017* to exchange experiences and share best practices. The team comprised 5 people (neonatologists, gynecologists, and midwives) from both banks of the Dniester River (1 male and 4 females), who visited the Department of Obstetrics and Gynecology, Center for Perinatology and Gynecologic Surgery, the outpatient and obstetrics units, the Labor and Delivery Unit, and the Neonatology Department. A special focus of the study visit was the planned opening of a training center in perinatal emergencies in Tiraspol, based on the Lithuanian example. Knowledge on technical aspects, structure, functions and equipment needed for the center, obtained during the study visit to Kaunas was crucial in developing the Center’s concept. According to the concept, the training center will aim to improve and maintain the level of practical skills of health professionals joining the pre- and in-service trainings. The Center will be connected to a similar unit in the Center for Mother and Child from Chisinau, where practitioners from the left bank will have the possibility to go through more advanced training programmes. The Center is expected to be fully equipped with IT equipment, supplies and manikins by March 2018, this making it fully operational.

A **needs assessment** of medical consumables was conducted in five perinatal care facilities in the Transnistria region (Rabnita, Grigoriopol, Tiraspol, Bender and Slobozia), involving 20 local staff representatives (five staff members from each of the assessed perinatal care centers). Following the recommendations, medical consumables and accessories are being purchased and will be provided to all five facilities (18,006 items presented by 76 categories). Medical consumables and accessories procured in 2016 were delivered during 2017 (6,476 items presented by 12 categories).

*Output 2: Primary health care professionals (family doctors and nurses) have improved their knowledge and capacity in ante- and postnatal care, including home visiting*

National guidelines on nutrition during pregnancy were developed in 2017 based on the WHO guidelines ‘Good Maternal Nutrition – the best start in life’. The approval, dissemination and user training of the guide are scheduled for 2018.

The WHO **Intercountry Meeting Improvement of the Antenatal Care** in Eastern Europe and Central Asia countries was conducted in Tbilisi, Georgia, during *27-28 April 2017*, bringing together professionals from 12 countries from the

European Region, including the Republic of Moldova, WHO collaborating centers, international experts and aid development partners from the maternal and perinatal health area. The specific objectives of the meeting were to: (i) share experience in implementing antenatal care standards; (ii) present WHO recommendations on antenatal care for a positive pregnancy experience, and technical adaptation; (iii) provide technical inputs to further improve the impact at national and regional level; and (iv) identify areas for further WHO technical support. The Moldovan delegation consisted of 5 experts, including from the Transnistria region (2 women and 3 men).

A training course on the **WHO e-training package on Managing of the MCH Programmes** was conducted in Chisinau and Tiraspol. The training in Chisinau was conducted during *6-8 September 2017* and was attended by 35 MCH managers (5 men and 30 women). The training in Tiraspol took place on *4-5 September 2017*, convening 25 health professionals (22 women and 2 men). The current e-learning package is based on the training course prepared by the WHO Child and Adolescent Health Programme in 2010 and is intended primarily for managers to implement MCH policies.

**The child care and development standard** for Transnistria region was developed in 2017 by a mixt group of experts from both banks of the Nistru River. The draft child care and development standard was elaborated in accordance with the latest recommendation of WHO on Parenting for Lifelong Health, the latest evidence from the 2016 Lancet Early Childhood Development Series and the UNICEF framework on Home Visiting.

An **assessment of child care and development standards**, including the home visiting component, was carried out by the team of the pediatric research laboratory of the Institute and Mother Health in Chisinau under the leadership of the Pediatric Faculty of State University of Medicine and Pharmacy “Nicolae Testemitanu”. Information was collected through checking medical documentation as well as interviews with parents and nurses of family doctors. The assessment revealed that only 75% of children up to 1 year old were overseen by primary health care in accordance with the child care and development standard. Moreover, the knowledge and counselling abilities of nurses were limited, especially on early detection of developmental delays, early stimulation of child development, safe environment, protection from physical and psychological violence and neglect. The results of the assessment will inform the development of the training curricula for nurses, which is planned for *May – September 2018*.

### *Output 3: Supportive environment for breastfeeding is created at primary care, hospital care and policy level*

An initiative to support the strengthening of **exclusive breastfeeding** practices was undertaken in all maternity wards in the Transnistria region during *3-6 October 2017*. Pregnant women, mothers and medical staff from maternities in Tiraspol, Bender, Slobozia, Grigoriopol, Dubasari, Camenca and Rabnita improved their knowledge and skills in breastfeeding, infant health and maternal health. It is the first module of lectures organized by WHO CO in order to disseminate information on WHO principles and modern criteria for successful breastfeeding in practice. Certified breastfeeding consultants from the “Mamica Alapteaza” initiative group were also involved.

A **training for breastfeeding** consultants was conducted during *8-10 November 2017* in Tiraspol, with 25 hospital (maternities) and PHC (women’s consultations) professionals participating, including neonatologists, midwives, gynecologists and nurses (all women). The training was conducted by ‘Mamica Alapteaza’ based on the WHO standard 18-hours training program for breastfeeding consultants.

**An assessment** of the content and existing practices of **antenatal classes for pregnant women** has been conducted in all 8 districts on the left bank on Nistru River and in 8 districts on right bank of Nistru River. As a follow up to the assessment and preliminary discussion with Tiraspol Health Authorities, the spaces for antenatal classes in Tiraspol

and Bender will be equipped with necessary basic furniture and equipment as well as video, visual and informational materials. The assessment on the right bank of the Nistru River revealed that antenatal classes are provided in the dedicated spaces, offices for Health Promotion (Briceni, Singerei, Cimislia and Vulcanesti) and Youth Friendly Health Services (Edinet, Orhei and Leova), and informational materials for beneficiaries are available. Only the Orhei Health Center has video materials and equipment for practical exercises.

**A country report on assessing policies and practices on breastfeeding** in the country, in accordance with World's Breastfeeding Trends Initiative (WBTi) tools, was developed and submitted to the International Baby Food Action Network (IBFAN). The results of the report on 10 managerial indicators and 5 clinical indicators will be validated by the MHLSP early in 2018 and will inform decision makers on the further strengthening of the Baby Friendly Hospital Initiative in the country.

*Output 4: Basic quality management mechanisms for the perinatal and child health services in place in the Transnistria region*

A follow-up visit on the **near-miss case review** (NMCR) implementation in the Transnistria region was conducted on *11 May 2017*, focusing mainly on the Tiraspol maternity. A meeting of the NMCR institutional committee was organized to discuss the most recent cases. The discussion was attended by 12 professionals (5 men and 7 women) involved in the near-miss case management, with WHO experts acting as observers. The committee members received feedback from observers on improving the further analyses on the near-miss cases.

Following the initial training courses on **Pocketbook of Hospital Care for Children** conducted in Chisinau and Balti in December 2016, there were several rounds of training courses organized in Chisinau and Tiraspol between *16 May-21 July 2017*, including two training courses for supervisors in *July 2017*. Each of the 6 training sessions targeted about 25 people (pediatricians and/or neonatologists and pediatric nurses) (males accounting for one-quarter on average) for a total of 150 trainees, including 19 trained as supervisors to use checklists for the assessment of respective health care facilities.

Seven protocols were developed and endorsed by health authorities from Tiraspol, aiming to align current standards in use in the Transnistria region with the **WHO standards in obstetric care**, based on recommendations provided during the mission conducted and facilitated by WHO expert back in 2016, and presented to professionals in *October 2017*. The meeting was attended by 53 obstetricians and neonatologists (35 women and 18 men) from all 7 facilities in the Transnistria region. Protocols focus on most common situations occurring in daily obstetrical care: 1) physiological birth/delivery, 2) C-section, 3) delivery with scar on uterus, 4) postpartum hemorrhage, 5) delivery induction, 6) eclampsia and 7) pre-term birth. Protocols were developed with facilitation from WHO experts.

**The antenatal care standard** and the **clinical protocol for non-complicated (physiological) pregnancy** for Transnistrian region were developed by a mixt group of experts from both banks of the Nistru River. The new antenatal standard is based on the evidence-based medicine and will ensure a more effective supervision of pregnant women and an efficient use of resources, including human. The new standard and protocol will be validated at a local workshop in the first quarter of 2018 with the participation of decision makers and gynecologists working with pregnant women in outpatient settings and will be submitted to the health authorities for approval.

The **national antenatal care standard** in Chisinau was also adjusted to the WHO recommendations on antenatal care for a positive pregnancy experience. In accordance to the new provisions, pregnant women will benefit from one additional visit (home visit). Moreover, pre-service and in-service curricula for obstetricians-gynecologists were

adjusted to the new evidence as per WHO recommendations on antenatal care for a positive pregnancy experience from 2016.

## **Outcome 2: Immunizations**

The goal of this outcome is that comprehensive quality immunization services are available for children.

*Output 5: Relevant health professionals have necessary knowledge and guidelines about vaccine contraindications, adverse events following immunizations, and effective vaccine management*

Following the training workshop on **adverse events following immunization (AEFI) surveillance, causality assessment and communications** in Montenegro from *November 2016*, there was an in-country WHO mission on AEFI surveillance assessment during *26-30 June 2017*. The main purpose of the mission was to provide guidance and technical assistance to the MoHLSP in assessing the national AEFI surveillance system and identify areas for further strengthening of pharmacovigilance. Mission members had meetings with key decision-makers, including MoHLSP, Agency for Medicines and Medical Devices (AMMD) as the National Regulatory Authority (NRA), Extended Program of Immunization (EPI) from the National Center for Public Health, and UNICEF, and featured field visits to selected sites (districts and municipalities). Mission recommendations have been developed for follow-up, including the development of national AEFI surveillance guidelines and AEFI training sessions.

At the end of the AEFI surveillance mission, a **national training** was organized for 114 specialists (72 females and 42 males) from all relevant areas, including public health specialists from all districts and municipalities (MoH Ordinance 468d of 28 June 2017), focusing on general vaccination issues, such as vaccine safety and contraindications, with a particular focus on AEFI and management of those.

Two public health and pharmacovigilance specialists (both females) from the Republic of Moldova, including Transnistria region, participated in the WHO sub-regional **advanced training workshop on AEFI causality assessment** for middle income countries in Bucharest, Romania, during *25-27 September 2017*. The aim of the workshop was to strengthen regional and in-country capacity on vaccine safety by sharing best practices and reviewing WHO recommendations, available guidance and tools for conducting causality assessment of serious AEFIs, including practical examples from countries.

Acting upon the recommendations of previous AEFI surveillance assessment missions, WHO organized an in-country mission to support developing the **national guideline on AEFI surveillance** during *11-15 December 2017*. The main purpose of the mission was to provide guidance and technical advice to the MoHLSP in developing a national guideline on AEFI surveillance. The guideline shall be based on WHO recommendations, available guidance and tools for setting up minimum capacity of AEFI surveillance systems to detect and respond effectively in case of AEFIs. A national steering committee established by the MoHLSP will be engaged in the guideline development process. The steering committee will include experts from key national authorities involved in AEFI surveillance and response, including EPI, NRA, clinicians from PHC and hospital care as well as medical education representatives. The national guidelines shall be finalized in the first half of 2018.

The third UNICEF **Vaccine Procurement Practitioners Exchange Forum (VPPEF)** was organized on *2-4 October 2017* at the UNICEF Supply Division in Copenhagen, Denmark. The purpose of the VPPEF was for participants to exchange and learn from each other on how to develop adapted procurement practices that ensure supply to meet national demand for vaccines. Two representative of the National Immunization Programme participated in the Forum and discussed

the experiences related to planning for initial procurement and securing sustainable supply of new vaccines into their national immunization program schedule, exchanged their theoretical and practical knowledge, learned from each other and built on the experience of the different countries and experts.

*Output 6: Public authorities have the tools to plan, budget and implement / scale up immunization activities*

Following the **global switch** from the trivalent oral polio vaccine (t-OPV) to bivalent OPV (b-OPV) worldwide as prescribed by the Global Polio Eradication Initiative (GPEI) and the unforeseen delay in the delivery of inactivated polio vaccine (IPV) to Moldova (and many more other countries) through UNICEF Supply Division due to the shortage of global manufacturing powers, it was advised that Moldova strengthens its acute flaccid paralysis (AFP) surveillance, which continued throughout 2017. Hence, support was provided to the national reference laboratory (poliolab) at the National Center for Public Health to continue AFP surveillance to keep the country's polio-free status, by collecting samples and transporting them to the international polio reference laboratory in Moscow, Russian Federation, based on a multi-year agreement, while benefiting from on-site training. It is expected that the IPV shall arrive in the country during Q1 of 2018 through UNICEF SD.

### **Outcome 3: Awareness raising and community mobilization**

Under this Outcome, the project aims at increasing the population's health literacy related to MCH and its awareness about availability of services and their right to access them, by means of:

- Developing and disseminating information materials to health professionals and communities regarding the services available to women, newborns and children at all health care levels;
- Raising the awareness of population on selected health topics (e.g., exclusive breastfeeding) and sharing information on the legal provisions related to the International Code of Marketing of Breast-milk Substitutes, securing enabling environment and support groups to maintain and promote breastfeeding; and
- Capacity building for health professionals involved in vaccination, and using innovative approaches in vaccination to help parents and family members be well informed about the vaccination schedule, proper timing and key information about vaccines and the diseases they prevent

*Output 7: Community-based parents' support groups set up with the support of civil society in the Transnistria region promote breastfeeding; provide peer-support and information about access to MCH services*

**Community parents support groups** shall be organized throughout 2018 following the launch of the mothers' schools. In August 2017, specific materials related to exclusive breastfeeding were developed and distributed during the World Breastfeeding week, which is celebrated yearly. Two events dedicated to World Breastfeeding week were organized for the target population: one in Slobozia and one in Orhei. Workshops with pregnant women and lactating women on the importance of exclusive breastfeeding during the first 6 months of life were attended by around 80 participants in both localities.

A calendar "We promote and support breastfeeding in 2018" with 12 evidence-based **key-messages on the promotion of exclusive breastfeeding and adequate nutrition of pregnant and lactating women** was developed. The calendar will be distributed through health care professionals to pregnant and lactating women.

*Output 8: Health professionals enabled to promote better parenting, child care practices and immunization*

Following the success of previous campaigns in 2015 and 2016, **European Immunization Week** activities were

organized in *April 2017* with partners' support, including flash mobs at selected sites or healthcare facilities, advocacy materials (caps, pens and balloons with relevant vaccination logos and messages), and specific information flyers targeting selected audience groups (e.g., care givers, health workers). In addition, UNICEF conducted a social media campaign starting with a media statement from the Regional Director on urging governments to invest in immunizing the most vulnerable children and addressing vaccine hesitancy in the region.

A **behavior-change communication strategy for vaccines 2017-2020** was approved in *July 2017*, based on communication for development (C4D) approaches. Experts provided comments, guidance and suggestions on the implementation of external communication activities by officials and experts from the National Center in Public Health (NCPH) to ensure a positive communication and awareness raising around immunization, with a special focus on HPV and measles, given the context. Advice and support was provided to NCPH staff to ensure a proper response to media queries a pro-active approach and partnerships with traditional and new media and the dissemination of pro-vaccine messages in social media. The consultant has been exploring the establishment of potential partnerships with the business sector to support the pro-immunization activities and encourage their social responsibility work towards increasing the rates of vaccination among children.

During the period *26-28 October*, the UNICEF International expert conducted an assessment study of attitudes and practices in Moldova and other three countries from CEE/CIS Region (Romania, Ukraine and BiH) in regard to immunization aiming at increasing demand for immunization. The visit was successfully conducted, including a field visit organized in Calarasi rayon. The draft report **Immunization and vaccine hesitancy in Europe and Central Asia: A systematic review of literature (2008-2017) and field visits to Bosnia and Herzegovina, Republic of Moldova, Romania and Ukraine** was developed and will be shared with national stakeholders from targeted countries.

Moldova successfully applied to the Gavi Vaccine Alliance for a two-year 'demo' project to introduce the **human papillomavirus (HPV) vaccine** for 20 thousand 9-10 years-old girls in *2018-2019* before considering scaling it up nationally. WHO has been providing support in preparing for the introduction of the HPV vaccine, including the drafting and translation (Romanian, English, Russian) of frequently asked questions, WHO position paper on HPV vaccines (May 2017), HPV vaccine training package (Romanian, Russian), videos, and national guidelines on the HPV vaccine for health workers (Romanian, Russian). Following a number of WHO missions, there was an HPV vaccine introduction communication action plan developed with specific activities. Many of the aforesaid activities, as well as the development of the HPV vaccine cost-effectiveness study and HPV vaccine introduction training sessions, a national conference etc., were co-funded by WHO and other partners.

**The National Action Plan for the Implementation of the Governmental Inter-Sectorial Strategy on the Development of Parenting Abilities and Competencies 2016-2022** was drafted by a team of experts in health, education and social protection under the lead of the Ministry of Education, Culture and Research. The final draft of the document will be shared with national stakeholders for consultation and validation.

### ***Challenges and Management Response***

A number of key lessons can be drawn from the implementation of the program thus far:

- Project activities started during phase I and continued during phase II have been more likely to succeed in effectively achieving intended results, provided that continuous follow-up is ensured and further scale-up of actions is applicable;
- Project activities have created synergies with other relevant initiatives, where applicable, thus ensuring quick implementation and attainment of outputs and outcomes;

- Bridging project activities with other ongoing WHO, UNICEF and UNDP initiatives brings additional value for all entities involved by expanding the scope of work;
- Relatively limited capacity in place in certain institutions required more time for implementation because of the need to first build their capacity, consuming more staff time and resources as well;
- Besides the initial dialogue with key beneficiaries of support, one has to consider reiterating the specific technical support needs on a regular basis, given the frequent reshuffling in health planners and decision-makers benefiting from this project, therefore redefining the scope of work and technical assistance, as needed, while ensuring ownership over and acceptance of findings, recommendations and strategic guidance, and efficient allocation of resources;
- Recommendations provided during assessment missions are better embarked upon by national stakeholders if followed by technical support and follow-up on selected topics between technical staff and relevant national stakeholder institutions;
- Strong political commitment, open ongoing dialogue and engagement of partners all along the way were critical to the success of implementing health sectors reforms, in particular in more sensitive areas (e.g., practices in obstetrics, vaccine contraindications), which is time-consuming and resource-intensive, requiring full dedication of involved personnel;
- Joint activities, such as study visits, missions and training sessions involving stakeholders from both banks of the Dniester River have been creating bridges for confidence building and knowledge transfer. Whenever appropriate, mixed teams of professionals have been involved during missions with international consultants and experts;
- Whenever relevant and possible, the training of trainers (ToT) approach was employed to ensure long-term sustainability;
- Given the frequent reshuffles in the Government, MoHLSP included (merging of the MoH and MoLSP into one MoHLSP), with lengthy selection of the State Secretary General for the MoHLSP and subsequent selection of state secretaries for specific areas of work, including public health, and long-pending creation of the National Public Health Agency instead of the current NCPH – periods during which basically no strategic decisions were taken – there was a need for additional coordination / negotiation meetings with stakeholders to ensure smooth project implementation;
- Some guidelines that were supposed to underpin the work in specific areas (e.g., perinatal audits) were issued by WHO headquarters later than expected, thus delaying the implementation of related activities at the country level. Besides, no suitable consultancy options were available who would be knowledgeable about the new guidelines;
- Some activities envisaged in the project were developed almost two years ago, requiring rethinking (e.g., cMYP process as a one-off procedure which is already completed and not requiring yearly disbursements), while other project activities might require additional funding (mid-term review of EPI) as the costs of such have been optimized during project drafting due to financial limitations. Other activities have been co-funded by other partners, thus also providing some costs-savings. Therefore, reprogramming of certain activities from co-funded components to under-funded ones could be expected, provided that the donor is duly informed and consulted with;
- Challenges were encountered with finding suitable local consultants (due to the relatively limited pool of skilled consultants available locally on the market at the time of contracting), leading to delays in project implementation for certain components. Hence, the services of international consultants have been secured for specific tasks instead, raising the costs for certain budget lines. At times, even international consultancy was challenging to secure given the short notice for some tasks, which otherwise were not possible to perform earlier (mostly due to political uncertainty) and had to be rescheduled for later (e.g., specific vaccination communication activities);
- As the experience of other health systems has shown, the lack of a functional medical supplies management and planning system inevitably leads to unstable supply of medical consumables for provided equipment. Therefore, to mitigate existing risks, the project assisted the beneficiary institutions to develop the existing medical supplies management and planning system, based on the right bank's experience. The activity is to be followed up during 2018;

- Some delays resulted from a preferred regional approach to doing things (e.g., upgrade of *VaccinApp* smartphone application for several countries) as was the case in the past. To avoid any further delays, it is advisable that Moldova moves forward with such upgrades for its citizens. Such delays are also contingent on finding suitable and affordable IT suppliers willing to do it and frequent updates of iOS and Android platforms, requiring constant maintenance and updates over the years; and
- Some global issues (shortage of inactivated polio vaccine (IPV) manufacturing powers worldwide) have an impact on the timely start of planned activities (e.g., introduction of IPV), leading to unplanned delays beyond the implementers' control (currently, IPV is supposed to arrive in Moldova in February 2018 to start being implemented as of March 2018). Likewise, Moldova was confirmed in 2016 as a country to have interrupted measles and rubella transmission for 3 consecutive years in a row, despite the challenging measles situation in the European region, including the neighboring Romania and Ukraine. Therefore, the planned activities to that end shall be redirected to ensure the maintenance of that status in the years to come.

**Indicator based performance assessment**

<b>Planned Indicator Targets</b>	<b>Achieved Indicator Targets</b>	<b>Reasons for Variance with Planned Target (if any)</b>	<b>Source of Verification</b>
<p><b>Outcome 1<sup>24</sup> Perinatal Services</b></p> <p><b>Percentage of pregnant women benefiting from antenatal care according to standards</b> Baseline: 74% (2011) Target: 80%</p> <p><b>Percentage of children of one year of age benefiting from health-care supervision according to standards, including home visits</b> Baseline (Moldova, excluding Transnistria region): 73% (2014) Target: 80% (2019)</p> <p><b>Percentage of perinatal institutions accredited and certified as baby/family friendly (Transnistria region)</b> Baseline: 0 (2014) Target: at least 50% (out of 8 perinatal institutions) are baby/family friendly (2019)</p>	<p>83% (2015)</p> <p>75%</p> <p>N/A</p>	<p>Based on assessment conducted in 2017</p> <p>Not started yet</p>	<p>The Quality of Care assessment of antenatal care offered to mother and newborn babies, 2015</p>
<p><b>Output 1</b></p> <p><u>Indicator 1</u>: 5 regional perinatal institutions (Tiraspol, Bender, Slobozia, Ribnita and Grigoriopol) are fully equipped</p> <p><u>Indicator 2</u>: At least 60% of health care professionals trained (out of 135 obstetrician-gynecologists, 253 – midwives, 29 – neonatologists)</p> <p><u>Indicator 3</u>: At least 4 curricula developed (2 curricula modules on perinatal care for doctors and midwives and 2 curricula modules on pediatric care for doctors and nurses)</p> <p><u>Indicator 4</u>: At least 2 guidelines and/or protocols developed for MCH services at hospital care level based on latest WHO provisions (perinatal &amp; pediatric care)</p>	<p>5</p> <p>50% of the planned</p> <p>N/A</p> <p>7 obstetric protocols developed and approved</p>	<p>The remaining health professionals are planned to be trained during the next years of the project</p> <p>Not started yet</p>	<p>Training related documents (agendas and lists of participants) and related ordinances</p> <p>Protocols available</p>

<sup>24</sup> Note: Outcomes, outputs, indicators and targets should be **as outlined in the Project Document** so that you report on your **actual achievements against planned targets**. Add rows as required for Outcome 2, 3 etc.

<p><b>Output 2</b></p> <p><u>Indicator 1:</u> At least 4 curricula modules for university and college education on ante- and postnatal care developed</p> <p><u>Indicator 2:</u> At least 2 guidelines and/or protocols for MCH ante- and postnatal services developed</p>	<p>N/A</p> <p>Antenatal care standard and clinical on physiological pregnancy for PHC developed, pending approval</p>	<p>Not started yet</p>	<p>Draft standards' available</p>
<p><b>Output 3</b></p> <p><u>Indicator 1:</u> At least 2 curricula modules on breastfeeding developed</p> <p><u>Indicator 2:</u> At least 1 guideline and/or protocol on young child feeding practices developed</p> <p><u>Indicator 3:</u> Accreditation criteria/certificates for Baby Friendly Hospital Initiative (BFHI) developed</p> <p><u>Indicator 4:</u> Legislative framework adjusted to the International Code of Marketing of Breast-milk Substitutes (ICMBS)</p>	<p>N/A</p> <p>Young child feeding practice incorporated into Guideline on home visiting for family doctors' nurses</p> <p>The working group was established by MHLSP, the process is under development</p> <p>N/A for the Transnistria region; In the rest of Moldova it has been revised</p>	<p>Not started yet</p> <p>Completed</p>	<p>Approved in July 2017 by MHLSP</p> <p>Available by the end 2018</p> <p>Report to IBFAN submitted in 2017</p>
<p><b>Output 4</b></p> <p><u>Indicator 1:</u> Perinatal audits institutionalized</p> <p><u>Indicator 2:</u> Near-miss case reviews in perinatal care institutionalized</p> <p><u>Indicator 3:</u> Supportive supervisory system in CH developed, including mentoring plan</p>	<p>The identification of the experts is in process</p> <p>Quarterly NMCR meetings</p> <p>The package on supportive supervision, including home visiting, updated and approved, December 2017 on the right bank of Nistru River</p> <p>Supportive supervision as part of the pocket book trainings conducted in Transnistria region during 2017</p>		<p>The activity will be launched in 2018</p> <p>Meeting minutes</p> <p>Mission report</p> <p>Guideline on home visiting available</p>

<p><b>Indicator 4:</b> Growth health-care monitoring standards approved and available at facility level</p>	<p>Standard on childcare and development under elaboration in Transnistria region</p>		<p>Draft standard available</p>															
<p><b>Outcome 2 Immunizations</b></p> <p><b>Vaccination coverage rates with DTP<sup>25</sup> and MMR<sup>26</sup> vaccines (Republic of Moldova)</b></p> <table border="1" data-bbox="113 662 722 812"> <thead> <tr> <th></th> <th>Baseline</th> <th>Target</th> </tr> </thead> <tbody> <tr> <td>DTP1</td> <td>94.1%</td> <td>95%</td> </tr> <tr> <td>DTP3</td> <td>90.3%</td> <td>95%</td> </tr> <tr> <td>MMR1</td> <td>89.8%</td> <td>95%</td> </tr> <tr> <td>MMR2</td> <td>93.4%</td> <td>95%</td> </tr> </tbody> </table> <p><i>Baseline and targets are for Moldova, including Transnistria region</i></p>		Baseline	Target	DTP1	94.1%	95%	DTP3	90.3%	95%	MMR1	89.8%	95%	MMR2	93.4%	95%	<p>91% (2017) 88% (2017) 93% (2017) 92% (2017)</p>	<p>Changing this outcome indicator requires more time and efforts, amidst growing anti-vaccination movement and parent / provider hesitancy. Still, MMR1 coverage rate in 2017 improved as compared with 88.8% in 2015, outlining overall positive trends.</p>	<p>WHO/UNICEF Joint Reporting Form (JRF) 2017</p>
	Baseline	Target																
DTP1	94.1%	95%																
DTP3	90.3%	95%																
MMR1	89.8%	95%																
MMR2	93.4%	95%																
<p><b>Output 5</b></p> <p><u>Indicator 1:</u> 50% of public health professionals trained on both banks of the Dniester River</p> <p><u>Indicator 2:</u> At least 2 public health professionals per district covered with trainings on both banks of Dniester River</p> <p><u>Indicator 3:</u> At least 8 Standards Operation Procedures (SOP) developed</p>	<p>114 specialists (72 females vs 42 males) from all relevant areas, including public health specialists were trained</p> <p>Immunization in practice (IIP) training courses were conducted in Moldova in 2017 (through the WHO Collaborating Center for Vaccine Trainings in Ankara)</p> <p>8</p>	<p>Activity to start in 2017 to avoid overlapping with other ongoing trainings</p>	<p>MoH/authorities ordinance, list of participants</p> <p>MoH/authorities ordinance, list of participants</p> <p>Approved, available</p>															

<sup>25</sup> Diphtheria-Tetanus-Pertussis, 2 doses to be administered (DTP 1, DTP 3)

<sup>26</sup> Measles-Mumps-Rubella, 2 doses to be administered (MMR1, MMR2)

<p><b>Output 6</b></p> <p><u>Indicator:</u> b-OPV and IPV vaccines are introduced in National Immunization Program</p>	<p>b-OPV – introduced IPV – planned to be started in April 2018</p>		<p>MoH correspondence</p>
<p><b>Outcome 3 Raising awareness and community mobilization</b></p> <p><b>Rate of early registration of pregnant women (before 12 weeks of gestation)</b> Baseline (Moldova excluding Transnistria region) - 70% (2014) Target – 80% (2019) Baseline (Transnistria region) - 63% (2015) Target – 75% (2019)</p> <p><b>Percentage of children 0-5 months of age exclusively breastfed</b> Baseline (Moldova excluding Transnistria region): 36% (2012) Target – at least 50% (2019) Baseline (Transnistria region): 13.9% (2014) Target – at least 35% (2019)</p>	<p>81.7%</p> <p>N/A</p>	<p>Although few things have been done under the project towards this outcome, the work done in other related areas and/or by other partners had a trickle-down effect to slightly influence the indicator</p>	<p>Quality of care assessment 2015 and Annual statistics' report 2016</p>
<p><b>Output 7</b></p> <p><u>Indicator 1:</u> At least 3 communities established community support groups</p> <p><u>Indicator 2:</u> At least 5 types of promotion materials about MCH and a breastfeeding developed and distributed through community based parents' support groups and health professionals</p>	<p>2 support groups established in Slobozia and Dnestrovsk districts</p> <p>Materials developed and distributed (7 posters on breastfeeding, flyers on pregnancy and smoking, calendar for breastfeeding mothers' for 2018)</p>	<p>The remaining shall be established in 2018</p>	<p>Materials available</p>
<p><b>Output 8</b></p> <p><u>Indicator 1:</u> At least 50% of public health and PHC authorities/professionals (out of 200 persons) have strengthened capacities in communication for better parenting and child care practices, including nutrition</p> <p><u>Indicator 2:</u> Public health authorities/professionals from 5 districts and 2 municipalities (at least 75 persons) in the Transnistrian region, and from the National Center of Public</p>	<p>Action Plan on the implementation of the National strategy on positive parenting is drafted. Guideline on nutrition during the pregnancy is drafted</p> <p>National vaccine communication strategy and Action Plan approved in July 2017</p>	<p>Expected to be approved by June 2018</p> <p>The guideline expected to be approved by June 2018 followed by the trainings for PHC professionals.</p>	<p>Drafts available</p> <p>Strategy and Action Plan budgeted and approved by MHLSP</p>

<p>Health in Chisinau have strengthened capacities in communication for immunization</p> <p><u>Indicator 3:</u> VaccinApp upgraded and regularly updated for main smartphones (Windows, Android, iPhone)</p> <p><u>Indicator 4:</u> At least 10 vaccine Information Statements for key vaccines and vaccine-preventable diseases developed and used</p> <p><u>Indicator 5:</u> At least 5 vaccination advocates identified and trained</p>	<p>384 PHC professionals and pediatricians were trained from 5 districts and 2 municipalities</p> <p>The activity will be initiated in 2018</p> <p>10 information statements for key vaccines developed and disseminated through social media, flash mobs, workshops and other related activities</p> <p>High-level policy dialogue organized on 17 February 2017</p>	<p>Not started yet</p>	<p>MHLSP ordinance, list of participants</p> <p>VaccinApp available in the application store (Android)</p> <p>Available at <a href="http://www.cnsp.md">www.cnsp.md</a> and Facebook page “Vaccinarea: da sau ba”</p> <p>Workshop agenda, materials and list of participants</p>
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## Support to National Human Rights Institutions

### *Programme overview*

The overall goal of the programme is to contribute to the effective protection and promotion of human rights, equality and non-discrimination in the Republic of Moldova with particular attention to women, minorities, marginalized and vulnerable groups. The programme seeks to catalyze the emergence of the strongest possible independent national human rights institutions for Moldova – Ombudsperson Office and Equality Council – and to increase their focus around core strategic human rights goals to maximize their impact. The programme aims to build the capacities, independence and empowerment of the two institutions to maximize their impact in mainstreaming human rights and equality, including gender equality, in acting on strategic issues and for the resolution of individual cases. The programme contributes to outcome 1.3 of the UN-Moldova Partnership Framework 2013-2017 (State bodies and other actors effectively promote and protect human rights, gender equality and non-discrimination, with particular attention to the marginalized and the vulnerable). There are three expected programme outputs:

1. Environment for the Ombudsperson Office and Equality Council strengthened;
2. Organizational capacities and sustainability of the Ombudsperson Office and Equality Council strengthened;
3. Ombudsperson Office's and Equality Council's powers maximized to act to Moldova's premiere national human rights institutions.

In late 2016, the programme board approved a no-cost extension to the end of March 2017 to allow for the finalization of some of the remaining activities.

### *Results*

**Outcome 1: State bodies and other actors effectively promote and protect human rights, gender equality and non-discrimination, with particular attention to the marginalized and the vulnerable.**

*Output 1: Enabling environment for NHRIs supported.*

*Output 2: Organizational capacities and sustainability of NHRIs strengthened.*

The activities aimed at supporting the enabling environment for and strengthening the organizational capacities and sustainability of NHRIs were implemented between 2014 and 2016.

*Output 3: NHRIs powers maximized to act on human rights issues and cases.*

In previous years, representatives of NHRIs were trained on applying the human rights based approach when reviewing the policies and legislation of the Republic of Moldova. A follow-up training on a more comprehensive methodology developed for conducting both human rights and equality impact assessments was organized in Chisinau on 30-31 March 2017 for a group of 11 staff persons (9 women and 2 men) from public institutions (Ministry of Justice, Ministry of Health, Ministry of Education, Ministry of Labor, Social Protection and Family, State Chancellery and Equality Council). Two NHRIs staff (1 woman and 1 man) assisted an international consultant as co-trainers, therefore further building the training capacities and raising the profile of NHRIs as expert and resource institutions for other public bodies in Moldova in the development of HRBA mainstreamed policies and strategies.

**Indicator based performance assessment**

Planned Indicator Targets	Achieved Indicator Targets	Reasons for Variance with Planned Target (if any)	Source of Verification
<p><b>Outcome 1 - UNPF Outcome 1.3</b> State bodies and other actors effectively promote and protect human rights, gender equality and non-discrimination, with particular attention to the marginalized and the vulnerable</p>			
<p><b>Output 1: Enabling environment for the National Human Rights Institutions supported</b></p>			
<p><b>Indicators:</b>                      I1: Identification of gaps in the NHRIs legislation in-line with the international standards and recommendations;                      I2: Updates to the data on public perceptions on human rights, attitudes giving rise to discrimination and conformity of implementation of law in the relevant areas.  <b>Baselines:</b>                      B1: No clarity to what extent the relevant NHRIs’ legislation is in compliance with international standards and recommendations;                      B2: Data on the public perceptions on human rights and attitudes giving rise to discrimination is outdated or otherwise insufficient; adequacy and conformity of judicial or quasi-judicial decisions vis-à-vis international law requirements inadequately known.  <b>Targets:</b>                      T1: Gaps in the NHRIs legislation in-line with the international standards and recommendations identified;                      T2: Data on public perceptions on human rights, attitudes giving rise to discrimination is updated and publicly available.</p>			
<p>1. a) Analysis of the relevant NHRIs legislation done; b) Recommendations on the NHRIs legislation are promoted in the government and Parliament;</p>	<ul style="list-style-type: none"> <li>• An opinion on Law 52/2014 on People’s Advocate elaborated and provided to NHRIs and national stakeholders.</li> <li>• A comprehensive legal analysis of the decisions of the Equality Council and of the domestic courts on discrimination issues elaborated and recommendations provided to NHRIs and national stakeholders.</li> </ul>	<p>2016 was a challenging year for the anti-discrimination laws in Moldova, as provisions for abrogation of Law No 121 on Ensuring Equality were put forward for adoption by some MPs. Therefore, was not the right moment and time to promote any legislative amendments so far. Furthermore, both NHRIs preferred to receive the finding and recommendations from all analyses, so working groups could be created at the beginning of 2017 with the aim of drafting the proposals for laws amendments.</p>	<ul style="list-style-type: none"> <li>• Public job announcements and consultancy contracts;</li> <li>• The opinion analysis report;</li> <li>• Draft analyses of Law 121/2012 on Ensuring Equality;</li> <li>• Missions agenda of the International Consultant;</li> <li>• Agenda of the public discussion;</li> <li>• List of participants;</li> <li>• Written communications with NHRIs and consultants;</li> </ul>
<p>2. a) Ombudsperson Office application for A-status NHRI elaborated; b) Ombudsperson Office application for A-status NHRI submitted and examined by the Sub Committee on Accreditation of the International Coordinating Committee for NHRI;</p>	<ul style="list-style-type: none"> <li>• A-Status application package translated into Romanian and relevant expert guidance on the application offered to NHRIs.</li> <li>• One two-days training on UN guiding principles for NHRIs’ mandate, especially Paris Principles and Belgrade Principles, was conducted for NHRIs staff.</li> <li>• One-day training on “The role of NHRIs in monitoring of the implementation by the state of UN</li> </ul>	<p>With reference to the findings and recommendations provided in the above-mentioned analyses, and in the process of mentoring the NHRIs for Status application, the Ombudsman Office acknowledged that due to the on-going institutional reform, the institution still needs to build/strengthen its capacities in order to be ready for a request to GANHRI for accreditation with A-Status in the upcoming years. While the Equality</p>	<ul style="list-style-type: none"> <li>• A-Status application package translated;</li> <li>• Trainings agenda;</li> <li>• List of participants;</li> <li>• Feedback forms from participants;</li> <li>• Trainings materials;</li> <li>• Photos from trainings;</li> <li>• Field mission’s information on the OHCHR Geneva staff (travel costs, DSAs, etc);</li> <li>• Communications with NHRIs.</li> </ul>

	<p>Recommendations” was conducted for NHRIs staff.</p> <ul style="list-style-type: none"> <li>• In addition, one Guidelines Methodology for Moldova’s NHRIs on the Monitoring of Implementation of Recommendations from UN Mechanisms was developed and provided in both, Romanian and English languages.</li> </ul>	<p>Council decided to apply to the GANHRI for accreditation for the first time.</p>	
<p>3. a) Regulation on the NHRIs annual reports hearings in the Parliament drafted; b) Annual reports of both NHRIs are heard in the Parliament;</p>	<ul style="list-style-type: none"> <li>• The Annual Report on Human Rights for 2015 of the Ombudsman was publicly discussed and the report disseminated to relevant national actors. The same report was further publicly heard during the meeting of the Parliamentary Committee for Human Rights and Interethnic Relations.</li> <li>• The Equality Council General Report for the year 2015 was publicly discussed and disseminated to relevant national actors. In addition, 2400 copies of infographics were printed-out and disseminated at the event.</li> </ul>	<p>There was no need to draft a separate regulation on the NHRIs annual report hearings in the Parliament due to the fact that the Parliament elaborated general regulations on hearings (including NHRIs reports). Equality Council General Report for the year 2015 was not heard in the Parliament because the Parliamentary Committee for Human Rights and Interethnic Relations had not took a decision on this in spite of Equality Council’s and project’s communication with the Committee on this issue.</p>	<ul style="list-style-type: none"> <li>• Agendas of the events;</li> <li>• List of participants;</li> <li>• Press-releases;</li> <li>• The annual Reports;</li> <li>• Photos from the events;</li> <li>• Mass-media coverage.</li> </ul>
<p>4. a) Studies on human rights attitudes and compliance with international human rights law are elaborated; b) Study on attitudes giving rise to discrimination is elaborated.</p>	<ul style="list-style-type: none"> <li>• The first ever “<i>Study on Equality Attitudes and Perceptions in the Republic of Moldova (2015)</i>” elaborated and widely disseminated.</li> <li>• The first ever “<i>Study on Perceptions of Human Rights in the Republic of Moldova (2016)</i>” was elaborated, publicly discussed and widely disseminated to the national stakeholders. 4 infographics were elaborated and widely disseminated on 2 languages, Romanian and Russian.</li> </ul>		<ul style="list-style-type: none"> <li>• Tender’s documents, contracts;</li> <li>• Tools for data collection;</li> <li>• Draft analysis of data collected;</li> <li>• The final studies, power point presentation and infographics;</li> <li>• List of participants and mass-media at the public discussions;</li> <li>• Press-releases;</li> <li>• Photos and other relevant documentations;</li> <li>• Report of the on-line campaign on infographics.</li> </ul>
<p><b>Output 2: Organizational capacities and sustainability of NHRIs strengthened</b></p> <p><b>Indicators:</b></p> <p>I1. Number of EqC decisions accessible for linguistic minorities;</p> <p>I2. Decrease in the backlog of the EqC’s cases.</p>			

<p><b>Baseline:</b>  B1. Only 2 EqC decisions are accessible for linguistic minorities;  B2. EqC has a backlog of 46 cases.</p> <p><b>Targets:</b>  T1. At least 40 EqC decisions are accessible for linguistic minorities;  T2. EqC's backlog 50% proportionately decreased.</p>			
<p>1. Qualification of at least 20 NHRIs' staff raised through the exposure to the international experience and ToT;</p>	<ul style="list-style-type: none"> <li>• Qualification of 23 members of the staff of the two institutions (11 of the Equality Council and 12 of the Ombudsperson's Office; 18 women and 5 men) raised through first-hand international expertise in various areas of their mandates.</li> <li>• Capacities of 21 NHRIs staff (18 women, 3 men) on dealing with specialised human rights issues improved through comprehensive human rights training programme.</li> <li>• 10 persons (7 women, 3 men) trained as human rights trainers and have the knowledge and capacities to conduct human rights trainings with other stakeholders.</li> </ul>		<ul style="list-style-type: none"> <li>• Training reports</li> <li>• Lists of participants</li> <li>• Back to office reports</li> <li>• Agendas</li> </ul>
<p>2. EqC is becoming a member of the Equinet;</p>	<p>Equinet explained that only equality bodies from EU Member States or candidate countries can be members of Equinet. Therefore, this activity was cancelled.</p>		
<p>3. a) Diversity mainstreamed into the employment rules and regulations of the NHRIs; b) Diversity mainstreamed within new vacancy announcements and processes, both NHRIs are accessible for people with disabilities;</p>	<ul style="list-style-type: none"> <li>• Both institutions have a diversity statement incorporated into their employment processes, into their job descriptions and vacancies, thus encouraging persons coming from underrepresented and vulnerable groups to apply for the jobs.</li> </ul>		<ul style="list-style-type: none"> <li>• Reports of the consultants and deliverables submitted;</li> <li>• Equality Council and Ombudsperson Office reports;</li> <li>• Web-sites; Announcements of job vacancies by both NHRIs; internal regulation documents (soft and hard copies).</li> </ul>
<p>4. a) EqC's case management improved using specialized software and strengthening staff skills; b) The proportion of the backlog of EqC's cases decreasing;</p>	<ul style="list-style-type: none"> <li>• Management Information System of the Equality Council (case management software) in place and expected to increase the efficiency of processing, monitoring and managing complaints;</li> <li>• Staff skills improved in using advanced legal technics, analysis, argumentation and decision</li> </ul>	<ul style="list-style-type: none"> <li>• The decrease in the backlog of cases, against the set targets, was not fully reached because of the fact that the case management software is put in operation at the end of the project implementation (this is due to technical issues in the process of development of the system and additional time necessary for the consultations processes for its development).</li> </ul>	<ul style="list-style-type: none"> <li>• Report of the software development company;</li> <li>• Transfer act signed by the software development company and the Equality Council.</li> </ul>

	<p>drafting skills, through expert assistance.</p> <ul style="list-style-type: none"> <li>• The backlog of cases in mid-December 2016 was 30 or 19,61% out of 153 complaints received during the year (to compare, the backlog of cases in 204 was 46 or 30,46% out of the 151 complaints received during the year) thus decreasing with 34,78%.</li> </ul>		
5. At least 40 EqC cases are translated into Ru;	<ul style="list-style-type: none"> <li>• 56 decisions translated to Russian and are available on the EqC website;</li> <li>• About 24 decisions of the Equality Council and about 13 decisions of the domestic courts were translated into English and provided to the Equality Council for being uploaded to the institution's webpage for further public access.</li> </ul>		<ul style="list-style-type: none"> <li>• The Equality Council's website: <a href="http://www.egalitate.md">www.egalitate.md</a></li> </ul>
6) a) EqC's decisions implementation tracking methods and Push Strategy drafted and tested; b) EqC's decisions implementation tracking methods and Push Strategy are implemented.	The activity was cancelled due to NOK-USD exchange rates fluctuation and therefore loss of financial resources and re-evaluation of priorities upon a request from the Equality Council.		
<p><b>Output 3: The power of the Ombudsperson Institution and Equality Council maximized to act as Moldova's premiere national human rights institutions</b></p> <p><b>Indicators:</b></p> <p>I1. Number of strategic human rights and equality issues NHRIs are working on;</p> <p>I2. Number of entities submitting alternative reports to UPR 2<sup>nd</sup> circle on Moldova</p> <p><b>Baseline:</b></p> <p>B1. NHRIs are not visible/lacking focus on working on strategic human rights and equality issues;</p> <p>B2. 12 national NGOs are involved into submissions to 2011 UPR.</p> <p><b>Targets:</b></p> <p>T1. Each NHRI is working on at least 3 strategic human rights and equality issues;</p> <p>T2. At least 24 stakeholders make submissions to the UPR 2<sup>nd</sup> circle on Moldova.</p>			
1. NHRIs monitor implementation of UPR recommendation and act on them;	<ul style="list-style-type: none"> <li>• Both NHRIs were engaged in the monitoring of the implementation of the UPR recommendations in preparation of their stakeholders' reports within the second UPR cycle;</li> <li>• One National pre-UPR Conference successfully organized;</li> <li>• One discussion on the NHRIs UPR alternative reports with the</li> </ul>		<ul style="list-style-type: none"> <li>• Agendas of the events;</li> <li>• Lists of participants and mass-media;</li> <li>• Press-releases;</li> <li>• Photos;</li> <li>• Relevant materials printed-out;</li> <li>• Mass-media coverage;</li> </ul>

	<p>development partners, embassies and civil society was held;</p> <ul style="list-style-type: none"> <li>• One press-club with local journalists from all over the country held;</li> <li>• One public event on the on-line webcasting of the UPR Session on Moldova held;</li> <li>• One International post-UPR Conference successfully organized;</li> <li>• One study-visit to Georgia on UPR mainstreaming in national strategies and plans, their implementation and monitoring successfully held;</li> <li>• UPR Recommendations easy-reading version disseminated.</li> </ul>		<ul style="list-style-type: none"> <li>• Field mission's information on the international speakers (travel costs, DSAs, etc);</li> <li>• Easy-reading version of the UPR Recommendations.</li> </ul>
<p>2. a) Training for NHRIs' participation in the 2<sup>nd</sup> UPR submission organized and completed; b) NHRIs take part in the 2<sup>nd</sup> UPR circle on Moldova;</p>	<ul style="list-style-type: none"> <li>• 18 NHRIs representatives (13 women and 5 men) increased their knowledge and capacities to monitor the implementation of UPR recommendations and draft stakeholder reports for the 2<sup>nd</sup> UPR cycle;</li> <li>• Both NHRIs submitted stakeholders' reports within the second UPR cycle, participated at the UPR Pre-session on Moldova during 3-7 October 2016, and held additional advocacy actions in Geneva toward promoting the recommendations made in their UPR report.</li> </ul>		<ul style="list-style-type: none"> <li>• Agenda of UPR Training Workshop;</li> <li>• Stakeholders report submitted by the NHRIs;</li> <li>• Agenda for the mission to Geneva;</li> <li>• Relevant mission's documents (travel, DSAs, etc);</li> <li>• Communication with NHRIs;</li> </ul>
<p>3. a) NHRIs identify strategic human rights and equality issues and act on 2 of them; b) NHRIs act on 2 other strategic human rights and equality issues;</p>	<ul style="list-style-type: none"> <li>• NHRIs has identified and acted on 6 strategic human rights and equality issues as follows:</li> <li>• <i>Documentation of discrimination cases</i>: 23 cases were documented and in 8 cases the victims were supported to file complaints to EqC; the EqC ruled on 4 of the cases;</li> <li>• <i>Roma discrimination in mass media</i>: the issue of Roma</li> </ul>	<p>The Consultancy for the Constitutional Court to the Ombudsperson Office was not offered due to 2 reasons: the Consultant hired ceased the collaboration in short time due to family related reasons, and on the other hand the institution has had already the support of the Council of Europe in this regards.</p>	<ul style="list-style-type: none"> <li>• Public job announcements and consultancy contracts;</li> <li>• Data base with cases on discrimination;</li> <li>• Decisions of the Equality Council;</li> <li>• Agendas and list of participants;</li> <li>• Analysis on gaps in the health sector;</li> <li>• Regulations for the expert groups;</li> <li>• Communication strategy;</li> </ul>

	<p>discrimination in mass media was identified jointly with the EqC, thus a strategic work with the Audiovisual Council is done in form of capacity building for journalists (1 human rights coffee with journalists, participation in 2 regional trainings);</p> <ul style="list-style-type: none"> <li>• <i>Right to health</i>: Ombudsperson office is working on monitoring of the right to health and access to health services as one major strategic human rights issue (a national monitoring and evaluation mechanism is being established); A national campaign is being implemented on the right to health;</li> <li>• <i>Trainings for legal professionals</i> on anti-discrimination issues, conducted in cooperation with NHRIs;</li> <li>• <i>HIV: equality and awareness raising</i> – Equality Council and Ombudsperson Office supported a public national wide awareness campaign on the rights of people living with HIV and combating their marginalization;</li> <li>• <i>Non-discrimination and Equality of Roma, LGBT, women, and persons with disabilities</i> – Equality Council led a national wide #OameniBuni campaign, which addressed equality and non-discrimination as well as promoted the necessity of the Law Nr. 121.</li> </ul>		<ul style="list-style-type: none"> <li>• Reports of the consultants;</li> <li>• The survey on human rights protection in emergency care services;</li> <li>• Agendas of the trainings and workshop, list of participants;</li> <li>• Mass-media coverage, press-releases, photos;</li> <li>• Reports on the implementation of awareness raising campaigns.</li> </ul>
4. Communication strategy of the Ombudsperson Office is updated and communication strategy for the EqC designed;	<ul style="list-style-type: none"> <li>• Communication strategies for both institutions designed and are being implemented.</li> </ul>		<ul style="list-style-type: none"> <li>• Communication Strategies;</li> <li>• Consultant's reports.</li> </ul>
5. a) NPM is set up and trained; b) NPM is active and functional;	<ul style="list-style-type: none"> <li>• Regulation of the NPM was elaborated and adopted, NPM members were selected at the end of 2016.</li> </ul>	<ul style="list-style-type: none"> <li>• Taking the NPM members were selected at the end of 2016 it was not possible to organise their training. In addition to this, it was</li> </ul>	<ul style="list-style-type: none"> <li>• NPM Regulation</li> <li>• News on NPM members selection</li> </ul>

		decided that the Council of Europe will train NPM members.	
6. NHRIs' websites are made accessible for persons with disabilities and linguistic minorities.	<ul style="list-style-type: none"> <li>The websites of the two NHRIs are under upgrade to become more accessible and user friendly and a new webpage is under development for the Children's Ombudsperson (to be functional by the end of 2016).</li> </ul>		<ul style="list-style-type: none"> <li>The webpages: <a href="http://www.egalitate.md">www.egalitate.md</a>, <a href="http://www.ombudsman.md">www.ombudsman.md</a> and <a href="http://copil.ombudsman.md">copil.ombudsman.md</a></li> <li>Reports of the contractors;</li> </ul>
7. 100% increase in stakeholders' submissions to the UPR 2nd circle on Moldova.	<ul style="list-style-type: none"> <li>The number of national NGOs involved into UPR submissions increased from 12 in 2011 (1<sup>st</sup> cycle on Moldova) to 62 in 2016 (2<sup>nd</sup> cycle on Moldova), i.e. 416% increase;</li> <li>The overall number of stakeholders UPR submissions increased from 15 (11 individual and 4 joint) in 2011 to 34 (15 individual stakeholder's submissions and 19 joint) in 2016, i.e. 126% increase.</li> </ul>		<ul style="list-style-type: none"> <li>Summary prepared by the Office of the United Nations High Commissioner for Human Rights in accordance with paragraph 15 (c) of the annex to Human Rights Council resolution 5/1 and paragraph 5 of the annex to Council resolution 16/21</li> </ul>
<b>Output 4: Effective Project management ensured</b>			
<b>Overall targets:</b>			
<ul style="list-style-type: none"> <li>Ensure at 100% delivery rate;</li> <li>Timely implementation of planned activities;</li> <li>Timely development and submission of work plans and progress reports;</li> <li>Compliance with UNDP rules and regulations.</li> </ul>			
1. Ensure at 100% delivery rate	<ul style="list-style-type: none"> <li>100% delivery rate was achieved.</li> </ul>		
2. Timely implementation of planned activities;	<ul style="list-style-type: none"> <li>Activities were implemented in a timely manner as planned, following the AWP. Where activities had to be amended or changed, this was collaborated with the project partners and is reflected in the report.</li> </ul>		
3. Timely development and submission of work plans and progress reports;	<ul style="list-style-type: none"> <li>Progress narrative and financial reports were drafted and submitted to the Project Board and the Donor</li> </ul>		
4. Compliance with UNDP rules and regulations.	<ul style="list-style-type: none"> <li>All contracting and procurement processes followed UNDP rules and regulations.</li> </ul>		

## Conclusions

During 2017, the UN Country Team Moldova has continued to increase the efficiency and impact of the 2013- 2017 United Nations Partnership Framework. The four programmes implemented under the Fund have made significant contributions to the development priorities of Moldova, as highlighted by the narrative and indicator based reports above. Two of the joint programmes, “Enhancing Women’s Political Representation through Improved Capacity and Enhanced Support in Moldova” and “Support to National Human Rights Institutions” have successfully finalized in December 2017. The two on-going projects “Joint Action to Strengthen Human Rights in the Transnistrian Region” and “Contribution to the Confidence Building Measures Program in Transnistria - Health Sector, Phase II” are to be concluded in 2018 and 2019 respectively.

The Multi Donor Trust Fund was set up in 2013 under the Delivering as One approach and continued to serve as a vehicle to support joint work in UNPF and secure additional funds that would not otherwise come to Moldova or to the UN. The interventions have been expanded from the exclusive focus on governance and human rights to also include the wider health agenda. The jointly delivered programmes have created stronger synergies among the stakeholders, incentivized establishment of partnerships with other similar initiatives, and ensured quick implementation of the activities.

2017 was a special year for the United Nations in the Republic of Moldova as the Government and the UN signed the United Nations Partnership Framework for Sustainable Development 2018-2022 that focuses on (i) Democracy, good governance, human rights and gender equality; (ii) Sustainable, inclusive and equitable economic growth; (iii) Environmental sustainability and resilience; and (iv) Inclusive and equitable social development. The new UNDAF is fully aligned with the 2030 Agenda for Sustainable Development and thus will be a key driver for the country’s efforts to achieve the SDGs and leave no one behind. In line with this, the UN in Moldova is planning to establish a new joint funding mechanism that will enable further implementation of joint programmes in a coherent and coordinated manner.