

## COVID-19 Response and Recovery Window of the Moldova 2030 SDGs Partnership Fund





Project: The most vulnerable people have improved well-being and have access to live saving products in line with international human rights standards and Vision 2030

Total Budget: 347,966 USD

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### Signatures

Participating UN Organization  UN Women  Dominika Stojanoska,  Country Representative	Signature: Date: 06-Nov-2020   8:27 AM EST
Participating UN Organization	
ILO	Signature:
Ala Lipciu, National Coordinator in Moldova	06-Nov-2020   10:36 AM EST Date:

#### **I.** Immediate Socio-Economic Response to COVID19

Starting in the Hubei province of China, the COVID-19 outbreak quickly spread to Europe and the rest of the world. In just 17 weeks, the outbreak of a novel coronavirus disease (COVID-19) has gone from an initially discrete outbreak to a raging pandemic. While we see some positive trends in Western Europe, Covid-19 remains a serious threat, and we see rapid escalation across Eastern Europe. The first case in the Republic of Moldova was confirmed on 7th March 2020. On the 12<sup>th</sup> of March the government announced the closure of all schools in the country. By the 13th of March, the government has raised the alert to red, and on the 17<sup>th</sup> the Parliament declared the state of emergency.

The COVID-19 pandemic started as a health crisis but has quickly shown a socio-economic dimension. Tackling COVID-19 is also a humanitarian and development crisis that is threatening to leave deep social, economic and political scars for years to come. Moreover, the pandemic contributed to worsening the existing inequalities for people in vulnerable situations, such as persons with disabilities, older people, Roma people, children without parental care and those in extreme poverty, especially in case of women and girls in vulnerable situations.

As of October, the country has reported a record-high number of cases - 1,149 - being reported on October 14, the pandemic situation showed some modest signs of improvement over the past few weeks. A total of 21,191 new cases were reported between October 1-29. This represents an over 30% increase compared to the total number of cases reported during the previous month and nearly 30% of all cases reported since the pandemic reached the country in March. The daily average number of new cases was 731 during the same period, which is 194 cases more compared to the previous month. The average number of new cases over the past seven and 14 days is 666 and 654, respectively, reflecting an improvement in the situation in the past few weeks. The total number of reported cases currently stands at 74,233. The total number of active cases continued to increase in October. The contagion rate is uneven across the country, with certain districts registering considerably higher rates than others. Briceni, Ocnita, Donduseni and Rezina had some of the highest contagion rates in the country last week, which ranged between 1.2 and 1.4. The contagion rate in Chisinau stood at 0.9. The share of health care workers in the total number of cases decreased gradually from 11.1% at the beginning of October to the current level of approximately 10.6%. Nearly 8,000 doctors, nurses, medical assistants and other staff from the health care sector have been infected with the virus since the beginning of the outbreak.

In terms of geographical distribution, Chisinau, with 43% of all confirmed cases, is the most affected area if the number of cases is considered. Transnistria region, ATU Gagauzia, Balti, Ialoveni and Edinet follow in the list of most affected areas, accounting for 3-9% of all cases each. Although the share of cases in these areas in the total number of cases has varied slightly since the beginning of September, the relative extent to which these areas have been affected by the pandemic has not changed. All other areas currently have 2% or less of the total number of cases each. More women have been infected with the virus than men, 59% vs. 41%. However, the percentage of men who have died from the disease is somewhat higher than that of women, 51% vs. 49%. These proportions remained stable throughout the entire month of October. The case fatality rate among men has also consistently stayed above the case fatality rate among women. Currently, the case fatality rate among men is 2.9%, and the case fatality rate among women is 1.9%; Real-time figures

and graphs can always be accessed <u>here</u> in Romanian and in Russian <u>here</u>. This site has more than 2.13 million views to date.

Research suggests that Moldova is near the top of countries with some of the highest incidence of cases in Europe and in the region. Prior to the pandemic, public health surveillance reform aimed at strengthening emergency preparedness, non-communicable diseases (NCBs) prevention and healthy life promotion was not completed. Therefore, the health and social systems remained weak, with an unfinished reform agenda and unable to respond quickly and diligently to the pandemic challenges and being largely dependent on external support. According to Global Health Security Index, before the COVID-19 crisis, Moldova's index score was 42.9 out of 100 suggesting that the healthcare system was vulnerable to public health crises and preparedness for epidemics was weak (2019) with particular concerns in the area of rapid response, health system capacity, detection and reporting, hence placing Moldova at 78 out of 195 countries.

As a result of strict and on-going lockdown measures, the most vulnerable groups of population are under imminent risks and with very limited resources for basic needs and limited access to essential services. Evidence shows that disease outbreaks affect women and men differently, and pandemics exacerbate existing inequalities for women and girls and discrimination of other marginalized groups such as persons with disabilities, Roma and those in extreme poverty. Also, the providers of direct and support services for people in vulnerable situations, including the national and local Non-governmental organizations (NGOs) are confronting the scarcity of resources to respond to the needs of their beneficiaries, as well as to cover the increased costs related to protective measures.

In April and May, the Government provided immediate relief in the form of income support to almost 15 thousand affected individuals, as inactive young people, young informal workers in rural settings and returnees due to the Covid-19 crisis, through the registration at the National Employment Agency (NEA). This has provided an extended emergency database for the National Employment Agency (NEA), filled with individuals in need of additional support to integrate the labour market once the state assistance is over. However, as a result of the crisis, the support could be rather limited, due to little available funds and capacities of public institutions to deliver in a short run, employment services and programs to most affected individuals.

### **II.** Solutions proposed

The proposed solution is to improve the well-being of people of Moldova, in particular of the most vulnerable, in a just and equitable society, in line with international human rights standards and vision of Agenda 2030 by equipping people from underrepresented groups from selected communities with essential products and protective equipment, including access to enhanced livelihood opportunities, decent work and productive employment, in order to improve their resilience against COVID-19.

In order to achieve this objective, the project will provide a rapid response to the needs of the most vulnerable population during the COVID-19 pandemic and the proposed activities will contribute to the achievement of the following results:

**Result 1**: Approximately 2,700 people in vulnerable situations, including older persons, persons

with disabilities and their families, Roma, families in vulnerable situation and children left behind from both banks of Nistru, have improved their resilience against COVID-19; at least 50 staff and volunteers of NGOs from both banks of Nistru river working at the national and local level, who are members of the NGO Task Force on COVID-19 and Human Rights are better enabled to provide direct social support services in response to the immediate needs of people in vulnerable situations;

**Result 2**: Approximately 100 unemployed persons (young seasonal workers and returned women migrants due to the COVID-19 crisis, in particular from the care economy in Western Europe) benefit from enhanced self- employment and income opportunities.

Through the proposed solutions, the project aims to assist the most vulnerable populations by providing immediate support, by proving essential supplies, such as food packages, PPEs and hygienic products to people from different marginalized groups, such as older persons, persons with disabilities and their respective families, Roma from targeted communities, families in vulnerable situations and children left behind including from the Transnistria region. Also, the project targets 50 staff and volunteers of NGOs from target districts<sup>1</sup> including from the left bank of the Nistru river working at the national and local level, who will be equipped with the necessary knowledge related to efficient COVID-19 protection measures. As part of the Result 1, the project intends to respond to the basic needs of most vulnerable groups, whose vulnerabilities are exacerbated due to pandemic, but also the representatives of NGOs and direct social providers, such as Roma community mediators.

Another important component of the project is related to providing access to employment (including self-employment) programmes for decent work and enhanced livelihood opportunities.

#### **Proposed solutions:**

As a response to the difficulties faced by the groups in vulnerable situations, the project aims at assisting the most vulnerable populations by providing immediate support, as well as access to employment (including self-employment) programmes for decent work and enhanced livelihood opportunities for female returnees and inactive young women and men. In specific terms, the following activities are proposed to be implemented:

- Identification, in close cooperation with members of the NGO Task Force, of the exact needs for PPEs, and hand sanitizers for the volunteers and staff, as well as the needs for food, hygienic and sanitary products for their beneficiaries in vulnerable situations;
- Procurement and distribution of PPEs and hand sanitizers for NGO members (at least 50 staff and volunteers of NGOs), from both banks of Nistru river, as well as food packages, hygienic and sanitary products, and of medicine for the target groups approximately 2,700 people in vulnerable situations;
- Capacity building through organization of informative sessions on the use of PPEs as well
  as on how to prevent the spread of the virus, for at least 50 NGO staff and volunteers,
  members of the NGO Task Force on COVID-19 and Human Rights;
- Capacity development to NEA to be able to quickly provide segmentation and referral to Active Labour Market Programmes of people directly affected by COVID-19;
- Provision of entrepreneurship and technical training, mentoring support, small grants and

<sup>&</sup>lt;sup>1</sup> Cahul, Rezina, Edinet, Balti, Soroca, Ungheni, Anenii Noi, Calarasi, Orhei, Basarabeasca, Comrat

- legal support to business registration.
- Communication, visibility and outreach to target groups through social media, cards and infographics.

### III. Background

Some groups are more affected than others by the pandemic. People from underrepresented groups are confronting the risk of infection, but are also more affected by the negative socio-economic impact on the pandemic. Evidence shows that disease outbreaks affect women and men differently, and pandemics make existing inequalities for women and girls and discrimination of other marginalized groups such as persons with disabilities, Roma and those in extreme poverty, worse. Currently, in Moldova more women continue to be infected with the virus than men, 59% vs. 41%. However, the percentage of men who have died from the disease is somewhat higher than that of women, 51% vs. 49%. These proportions remained stable throughout the entire month of October. The case fatality rate among men has also consistently stayed above the case fatality rate among women. Currently, the case fatality rate among men is 2.9%, and the case fatality rate among women is 1.9%.

The Covid-19 pandemic has caused a severe fall in economic activity in Moldova, putting the labour market under unprecedented strain almost doubling the underemployment (from 4,3 % in Q1 to 7,8 % in Q2, 2020 ) and rising inactivity (from 30,8 % in Q1 to 32,6 % in Q2, 2020 ). The Labor Force Survey has found as early as March that the pandemic has affected women more than men at the workplace (the share of women is 60.5 % of the total number of people affected at work and that of men is 39.5 %).

The health crisis has increased inactivity, underemployment, and informality; it has kept many seasonal workers off their circular migration path, while others (mostly women) have returned home, losing their livelihoods<sup>2</sup>. Many men, particularly heads of household with lower levels of education, usually engaged in survivalist emigration to CIS, have lost their livelihoods for the current year. Thus, recently Moldova has witnessed massive returns, including those who already were well established in the receiving countries. Such a trend represents a burden on the country. Some are seeking possible opportunities at home whilst waiting for the next chance to leave; others are considering how to capitalize on the skills and financial resources acquired abroad in order to establish themselves in their home country.

<u>Vulnerability</u> is often understood as susceptibility to harm, that results from an interaction between the resources available to individuals and communities and the life challenges they face. As such, most pre-existing vulnerabilities of under-represented groups have been exacerbated by the COVID-19 pandemic. Among the most affected groups, that the project envisages to support are the following:

**Persons with disabilities,** especially women with disabilities are one of the most vulnerable groups in Moldova. The inequality studies from 2017 and 2019, highlight that persons with disabilities are amongst the groups that are mostly affected by poverty, together with older people. According to the data of sociological study conducted by CSOs on the impact of the pandemic on the rights of persons with disabilities, more than 50% of households with persons with disabilities are

<sup>&</sup>lt;sup>2</sup> In the first part of 2020, over twice more people registered as unemployed as compared to the same period of 2019 (34 thousand individuals), 34% being young people and 54% from rural areas. NEA's newsletter as of June, 2020

economically and socially affected, with more than 85% of the households reporting already in May 2020 that they would be left without necessary resources should the state of emergency continue. Reductions of already low incomes and higher spending caused by the pandemic, led to greater impoverishment of persons with disabilities, especially women with disabilities, as well as of families with persons with disabilities. They are facing a lot of issues during the pandemic time, due to various factors, such as isolation, lack of accessible information, lack of support from family members or community to buy the necessary living products, lack of opportunities to access or to retain a job, financial issues, fear, anxiety etc. Besides this, their access to social, health and rehabilitation services, including the ones aimed at protecting sexual and reproductive rights is limited during the pandemic. All these were also highlighted by the members of the NGO Task Force on Covid-19 and Human Rights during the thematic monitoring meetings organized by OHCHR in August 2020.

Older persons, especially older women: are more likely to experience serious and life-threatening complications from COVID-19 infection. Analysis of the <u>national data</u> with regards to distribution of cases of infections based on age shows that on 3 November 2020, around 28 % of the total number of people diagnosed with Covid-19 are older persons (60+) and 78 % of caused deaths were among 60+. The increased risk of serious infection has led authorities to impose continuous isolation measures, with the prohibition for the older persons above the age of 63+ to leave their home, except in specific circumstances. Thus, in addition to direct risks to the health of the older people, the pandemic risks induce much more pronounced negative effects related to their social isolation, material and mental well-being, access to labor market, abuse and neglect, and limited access to health services. According to the data of the National Bureau of Statistics (NBS), 24,3% of households composed of a single person aged 60+ are facing absolute poverty. The risk analysis of impact of COVID-19 on older persons conducted by UNFPA shows that older women were among the most affected and most vulnerable populations, having the highest risk of poverty. Women represent nearly 60% of older people (BNS data). Moreover, 44,7% of older persons declared that their available income was not sufficient for the minimum existence needs, further exacerbated during COVID-19 (Public Opinion Barometer, 2020). Also, the members of the NGO Task Force highlighted during the thematic meetings conducted in August 2020 that older people are one of the most affected groups by Covid-19, especially those who live alone and who are bed-driven / care dependent, being affected by the: a/limited access to food, water and hygienic products; b/ limited access to medical and therapeutic services, as well as to medicine; c/ social distancing and limited access to communication and support services which contributes to increased anxiety. With the existing restrictions, they have to depend on the support of the community to access nutritious food, basic supplies, money, medicine to support their physical health, and social care. Social services, including those provided by NGOs, which primarily provide support to older people, face difficulties in operations during the pandemic.

Roma from vulnerable families and Roma single mothers are among the most marginalized, vulnerable and excluded persons in the country, with many of them living in extreme poverty, facing discrimination on a daily basis, and often living in inadequate housing, with limited access to safe water, sanitation and electricity. Even before the pandemic, the <u>studies</u> showed that Roma were confronted with monetary deprivation, being caused by their reduced inclusion in the labour market or in other productive activities. The crisis caused by the COVID-19 pandemic has exacerbated inequalities. According to an UN Women <u>study on the impact of the pandemic on Roma people</u>, during lockdown, the absolute majority of Roma women did not have access to protective equipment – 95% (in the case of men – 80%). More women than men lost their jobs or were sent on an unpaid or partially paid leave during the pandemic crisis. Thus, compared to Roma

men, three times more Roma women lost their jobs, which only made their financial vulnerability worse. About 42% of people in the 35-49 age group lost their job during the emergency. The Roma population faces a significant economic burden, due to the fact that they are mostly engaged in unskilled labor, which is stopped during the lockdown. Roma complained about the lack of financial resources to procure food supplies, masks, sanitizers or other indispensable products during the pandemic. Thus, the pandemic exacerbated the state of poverty that Roma, especially women with children and single mothers.

Families in vulnerable situations (families living in poverty, families with many children, single mothers) - according to a <u>study on the impact of COVID-19 on families in vulnerable situations</u> face a decrease of income, with some families indicating a total lack of income. Income generated from casual work largely decreased due to difficulties of commuting to other localities and a reduction of opportunities for short contract work (i.e. daily labour). Food insecurity is another problem faced by families in vulnerable situations.

Children living in vulnerable families are also affected, as they have overlapping vulnerabilities, particularly when being part of a poor household. According to 2018 data from the National Statistics Bureau, households with 3+ children have the highest rate of absolute poverty among any group – 42%, a starting point that, by virtue of low resources, limits their ability to adapt to the pandemic. The inability of children to attend school will likely contribute to a further inequality of educational performance between pupils from socially advantaged pupils and socially disadvantaged ones, observed in PISA tests.

Women have also been directly affected by the pandemic, with the Ministry of Health and Social protection reporting that the number of domestic-violence related calls has increased 30% during and immediately after the lockdown period, a trend also confirmed by UN Women.

**Note:** Other groups of beneficiaries of essential supplies will be established in close cooperation and communication with the members of the NGO Task Force on COVID-19 and Human Rights.

Female returnees have been forced to return home or re-evaluate their work prospects, with informal workers having low legal protection and falling outside of the social safety nets. Several tens of thousands have returned to Moldova since the beginning of the crisis<sup>3</sup>. Travel restrictions have also meant that seasonal migrant workers have been prevented from taking up employment abroad for which they have contracts, and for which many may have paid high recruitment fees and costs. The crisis threatens to dry up remittance flows, which provide 16 % of the country's GDP—a vital source for nearly 40 thousand Moldovan households. Some female returnees are ready to invest and self-employ in Moldova, but to do so they need financial support and consultancy to launch start-ups. The others bring skills and knowledge, hence require support to adapt and get employed.

Inactive young women and men: Young people have been hit particularly hard by the COVID- 19 crisis, since this group normally has a higher risk of becoming inactive, there is a danger that they will face long- term labour market disadvantages. It is expected that the health crisis will further increase their skills fragmentation and decrease their resources. Experience from earlier crises shows that activating inactive people is even harder than to re-employ unemployed people, since they are likely to experience a loss of their human capital (accumulated during education), with negative consequences and substantial costs both for the individuals and for society in general.

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<sup>&</sup>lt;sup>3</sup> IOM, 2020. Rapid assessment survey among Moldovan migrants

Those providing essential services, including social care workers, community mediators, service providers in shelters and representatives of NGOs are also at more risk of infection. The access to PPEs in the country remains limited and, particularly, for those from remote communities and affected by extreme poverty. Also, the project targets the representatives of NGOs and direct service providers, including Roma community mediators that are providing direct and support services to people in vulnerable situations. The members of the NGO Task Force on Covid-19 and Human Rights re-emphasized during the thematic meeting organized by OHCHR in July - September 2020 the increased costs of providing direct services due to the need of providing staff with PPEs, as well as scarcity of resources in this regard. Among others, Roma community mediators are one of the most affected groups of population, including because their ethnicity makes them already part of a discriminated groups and their position of community mediator, makes responsible for Roma population from their communities, requires close contact with Roma. Besides the economic burden of the Roma population, Roma had difficulties of accessing social and health services, before COVID-19, and it became practically impossible during COVID-19. The whole burden to inform and to guide Roma population falls on 47 Roma community mediators, who are perceived as leaders and main advisors for Roma communities.

In recent years, the outward migration has been unrelenting with around 1,000 families leaving every month. In the context of economic and public health crisis related to COVID-19 pandemic, roughly 150,000 labour migrants<sup>4</sup> have returned to Moldova during 2020, which represents around 10% of the domestic Moldovan working population. A part of this population will "re-emigrate" while the others will consider the opportunities to capitalise on the skills and financial resources abroad in order to establish themselves in their home country.

#### IV. Theory of change

This programme is constructed as an emergency response to the acute needs in PPEs, food packages and hygienic products, as well as access to employment opportunities to the most vulnerable groups of population. Another important component is the capacity building and providing the necessary working tools in the midst of the COVID-19 outbreak for the representatives of NGOs and direct service providers to most vulnerable groups of the population. It is based on the main assumption that rapid and efficient provision of the necessary materials, supplies and capacity assistance to target groups and beneficiaries will enhance the income and livelihood opportunities and slow down considerably the infection rate with COVID-19 in the country. By this project we plan:

- 1. To ensure that most vulnerable 2700 people have improved wellbeing and have access to live saving products and that the service providers have the necessary knowledge and equipment for ensuring safety during service provision; and
- 2. To ensure equal opportunities at job facilitation and training activities for men and women design, to enable access of young women at risk of poverty and exclusion and female returnees, as most disadvantaged groups, to timely, good quality and tailor-made services and facilitation of their inclusion into decent work.

The project logic is based on the following **Theory of Change:** 

• If the people in vulnerable situations from rural and urban areas, including older persons, people with disabilities, Roma, families in vulnerable situations, children

<sup>&</sup>lt;sup>4</sup> IOM's estimations as of May 2020

without parental care, who are beneficiaries of the NGOs from both banks of Nistru river, who are members of the NGO Task Force on COVID-19 and Human Rights are provided with life-saving packages and personal protective equipment, **then** the resilience in coping with the COVID-19 pandemic improves and the risk of absolute poverty decreases.

- If the NGO staff and volunteers from both banks of Nistru river, working at the national
  and local level, who are members of the NGO Task Force on COVID-19 and Human Rights
  receive awareness and informative sessions on proper use of personal protective
  equipment (PPEs), and on prevention related materials contextualised to the local
  situation on the proper use of PPEs ( in two languages), then social services delivered
  will better respond to the needs of people in vulnerable situations.
- If the National Employment Agency has adequate capacity and tools for unemployed people segmentation and referral to Active Labour Market Programmes, then unemployed people directly affected by COVID-19 (young seasonal workers, women returnees due to the COVID-19 crisis, etc.) will enhance their income opportunities and livelihoods because the access to jobs and entrepreneurial activities was improved.

The project will aim to achieve the following results as mentioned above:

**Result 1** Approximately 2,700 people in vulnerable situations, including older persons, persons with disabilities and their families, left behind children from both banks of Nistru river, have improved their resilience against COVID-19; at least 50 staff and volunteers of NGOs from both banks of Nistru working at the national and local level, who are members of the NGO Task Force on COVID-19 and Human Rights, are better enabled to provide direct social support services in response to the immediate needs of people in vulnerable situations;

**Result 2** Approximately 100 unemployed persons (young seasonal workers and returned women migrants due to the COVID-19 crisis, in particular from the care economy in Western Europe) benefit from enhanced self- employment and income opportunities.

The actions under this project provide immediate, and desperately needed solutions to the COVID-19 outbreak. At the same time, they are delivered in line with the highest global standards and international guidance developed for this and other types of emergency situations, drawing on a wealth of experience from the United Nations system as a whole. This enables the simultaneous transfer of skills and know-how to national counterparts, and the testing of existing and newly setup national emergency protocols for planning, responding and coordinating multi-stakeholder efforts in crisis situations. These mechanisms are constantly reviewed and strengthened to become more efficient and effective, and this process will continue in the post-crisis period, enabling a more effective national response to similar crises in the future.

The project is based on the principle of "build back better. In this regard, **UN Women and OHCHR** will work with NGOs, their members and beneficiaries on building the knowledge on how to reduce the vulnerabilities of the different underrepresented groups they work with and for, during the COVID pandemic. In order to ensure a participatory approach, the NGOs will be consulted in identifying the most vulnerable beneficiaries, as well as support in the determination of which types of products are most required by people in vulnerable situations within the project. As a result, over 2700 people from vulnerable groups, around 50 staff members and volunteers members of the NGO Task Force on COVID-19 and human rights will be better equipped and prepared to respond to and deal with the COVID-19 crisis. The proposed activities are focused

mostly around the needs of the people and protection of their rights to the decent life condition and life free of violence and discrimination. Based on its Strategic Note UN Women will continue to work with the same target groups on development programs, capacities development and will contribute to build and develop their resilience during the hazardous times, but also on the impact of COVID 19. In addition, UN Women will engage and support the government and district leadership with tools for integrating abovementioned interventions in the national and district development/crisis management plans and budgets, as part of gender responsive budgeting in preparation for future outbreaks and crisis.

The ILO will strengthen the capacities of NEA to client segmentation for a better service pathway delivery and timely referral to employment programmes. Additional support will be directed to improve the capacities to cater to those most affected by the health crisis to activate and integrate the labour market through provision of entrepreneurship and technical training, legal and mentoring support and small grants to business registration. As a result 50 program beneficiaries will be enrolled in NEA employment subsidy scheme and enabled to take up a job as a result and other 50 people will launch start-ups.

#### V. Documentation

The Government of Moldova (GoM, from now on) has developed the COVID-19 Preparation and Response Plan with the support of the WHO (available in the WHO Partner Portal), which was approved on 13th of March by the Prime Minister. The Plan covers the 7 pillars (1 to be added) mentioned in the WHO guidelines. By 23rd of March, the RCO and WHO have developed a comprehensive Needs Assessment of the Health System in Moldova to respond to the COVID-19 crisis. The document has guided the support of different development partners (Sweden, WB, Norway, Switzerland, etc.) and also the investment from the Ministry of Health Labour and Social Protection. As a result, a large deficit was identified on PPEs, health equipment (ventilators, oxygen concentrators, etc.), medicine and consumables. The total cost of the response has been estimated at \$38,366,494.61, of which \$35,642,013.39 were requested to be covered by development partners. Additionally, the GoM has manifested reduced capacity to import materials and equipment and has requested support from the UN system in this regard. Detailed breakdown of those costs is presented in the table below.

The UNCT has completed and posted the National Plan for Combating COVID-19 on the WHO partner portal. Since early March, WHO has been providing technical support to the Government of Moldova (GoM, from now on). The GoM has developed the COVID-19 Preparation and Response Plan (available in the WHO Partner Portal) which was approved on 13<sup>th</sup> of March by the Prime Minister. Among other actions, UNFPA, WHO and the RCO have supported the development of the Moldova COVID-19 real-time monitoring platform (available in Russian and Romanian language). The Romanian version of the site is receiving roughly 60,000 views a day, and this translation will help this information reach a broader audience. This was developed with the support of AO Positive Initiative and UNFPA. All decisions from the Emergency Commission are placed here. In line with the mentioned Assessment, the RCO has updated WHO Partner Platform with requests of resources for more than \$35mln. The WHO Partner Platform currently has eight UN agencies, eight member states, and the GoM participating (33 total registered users).

It is estimated that the capability of the Health System to provide intensive care will be at its maximum capacity when 9,000 or more COVID patients require support at the same time. While

the country has reasonable availability of beds for patients with mild symptoms, it only has a maximum of 452 ventilators for assisted respiration and 481 ICU beds.

With the aim to ensure effective coordination in the COVID-19 response, the UNCT has maintained the existing inter-agencies groups (Transnistria Region Task Force, Gender Team Group, Migration Task Force, and) and created in early March four (4) new task teams in to coordinate supports in the following areas: education, socio-economic impact, Procurement Task Force, and Big Data. The RCO, WHO, and UNICEF are also part of the crisis and risk communication Task Force under the Ministry of Health.

Under this groups a number of assessments were undertaken or are ongoing:

- Socio Economic Impact Assessment (UNDP)
- Assessment of the impact of COVID-19 on Education (UNICEF)
- Effects of COVID-19 crisis on women (UN Women)
- Rapid assessment on "Women's needs, affected by gender-based violence and of the systemic response to cases of domestic violence in the context of the COVID-19 crisis" (UN Women)
- Rapid needs assessment for organizations supporting people with HIV (UNAIDS)
- Rapid mapping of Moldova's economic vulnerabilities in the context of challenges posed by the Covid-19 pandemic (macroeconomic assessment) (RCO)
- Rapid surveying of diaspora plans/intentions and profile of vulnerability in 9 countries of destination of Moldovan migrants (IOM)
- Impact Assessment of of Covid-19 on labour market and policy responses (ILO)
- Analysis of the risks of the COVID-19 pandemic on the older persons in the Republic of Moldova (UNFPA)
- Effects of the crisis caused by the COVID-19 pandemic on the Roma population in the Republic of Moldova (UN Women)

The RCO is keeping track of all contributions from development partners to support the GoM (table here). This mapping allowed the identification of the most needed actions and goods for the development of this project proposal. Additionally, the RCO has been organizing a series of informative meetings with Development Partners in Moldova jointly organized with the World Bank and the Ministry of Health, Ministry of Finance, Ministry of Foreign Affairs and the Center for Aid Coordination. This last one, created by the Prime Minister Office after successful lobbying by the RC, is to ensure effective communication with all development partners during the COVID-19 crisis.

Among other actions, UNFPA, WHO and the RCO have supported the development of the Moldova COVID-19 real-time monitoring platform (available in Russian and Romanian language). Additionally, the RCO keeps track of the crisis situation (number of cases, death, distribution per region, etc.) and generates visual information based on real time data which is shared with Development Partners and Government counterparts.

The UNCT has opened a <u>Covid-19 Response and Recovery Window</u> in an already operational Multi-Donor Trust Fund. The objective of the country-based Trust fund is to support the Government of the Republic of Moldova and its people to successfully overcome the immediate and long-term adverse health, social and economic consequences of the pandemic. It has two main outputs: 1. The healthcare system and other relevant authorities and stakeholders in Moldova have improved capacities, means and instruments for a rapid response to the gaps, needs and priorities in

connection with the outbreak of the pandemic; and 2. The social and economic consequences of the outbreak of the pandemic on affected sectors, areas and vulnerable groups are adequately addressed through targeted policy, technical assistance and support.

As an immediate offer of support to the Republic of Moldova, the United Nations developed a Response and Recovery Plan for the period June 2020 - December 2021, that is based upon ongoing assessments and the United Nations framework for the immediate socioeconomic response to COVID-19. The aim of the response and recovery plan is to anchor the socio-economic response to COVID-19 firmly within the national COVID-19 response and long-term development plans, and to leave no one behind.

The following guidelines were followed for the development of this project document:

- WHO guidelines to support countries preparedness and response;
- ToR for UN COVID-19 Response and Recovery Multi-Partner Trust Fund
- Gender Marker
- OHCHR Covid-19 Guidance
- IOM's Standard Operating Procedures (SOP) for Front-line Border Officials at the PoEs in response to COVID-19 Outbreak
- IOM's Health, Border, and Mobility Management (HBMM) framework,
- Guidance for Local Procurement of Personal Protective Equipment, 16.04.2020
- UNICEF COVID-19 Health Emergency Supply note
- UNICEF Supply Catalogue

### **VI.** Target population

The project envisages to provide direct support to the following target population and groups:

People in vulnerable situation from both bank of Nistru river: over 2700 women and men from underrepresented groups, including older people, Roma, people with disabilities and families of persons with disabilities, vulnerable families (single mothers, families with many children) will receive immediate and preventive supplies (PPEs, hygienic products, food packages). By this, the most vulnerable groups of population from Cahul, Rezina, Edinet, Balti, Soroca, Ungheni, Anenii Noi, Calarasi, Orhei, Basarabeasca, Comrat rayons, as well as, in several communities from Transnistria region will have access to life saving products.

Representatives of NGOs from both banks of Nistru river: at least 50 staff and volunteers of NGOs from both banks of Nistru working at the national and local level, who are members of the NGO Task Force on COVID-19 and Human Rights. The representatives of NGOs will be equipped with PPEs and sanitizers, as well as with the necessary knowledge related to

**Unemployed people:** At least 100 unemployed people due to COVID-19 (young seasonal workers, women returnees due to the COVID-19 crisis, etc.).

The project partners are the NGOs, members of the NGO Task Force on COVID-19 and Human Rights, National Employment Agency that will provide support in identification of the most vulnerable beneficiaries and facilitate the process of distribution of the immediate and preventive

supplies (sanitizers, hygienic products, food packages), including registration as unemployed for targeted support and access to employment opportunities. The identification of the needs was determined in coordination with members of the NGO Task Force on COVID-19 and Human Rights, National Coalition Life Without Violence, Local Public Authorities (LPA's), community mediators etc. The state income support offered through NEA in April-May to vulnerable workers like self-employed, seasonal workers, workers in atypical forms of work, returning migrants who lost their job due to the crisis, provided an extended emergency database filled with individuals in need of additional support to integrate the labour market. Thus, the project will contribute to support measures and to active labour market programs to enable access of young women at risk of poverty and exclusion and female returnees, as most disadvantaged groups, to timely, good quality and tailor-made services and facilitation of their inclusion into decent work.

#### **VII.** Implementation arrangements

**UN Women and OHCHR** will support with the identification and provision of immediate and preventive supplies that will be delivered to affected groups of people in vulnerable situations, including persons with disabilities, Roma and their respective families, older people, families in vulnerable situations, but not limited to them. The supplies will include sanitizers, sanitary supplies, food packages (for at least two months), soap, among others and in line with the needs identified with the support of NGOs. As well, targeted NGO's will be equipped with knowledge to ensure that the PPE's are used according to the procedures and regulations and by this prevent the spread of the virus. **OHCHR and UN Women** will work in close cooperation with the members of the NGO Task Force on COVID-19 and Human Rights on identification of the most vulnerable groups, facilitating the distribution of the essential supplies, as well as, facilitating the awareness and informative sessions on proper use of personal protective equipment (PPEs), prevention related materials contextualised to the local situation on the proper use of PPEs in the targeted districts and communities.

**UN Women and OHCHR** will continue to support initiatives coordinated with the National Coalition Life without violence, which also comprises NGOs from the Transnistria region dealing with elimination of violence against women (Interaction, Resonance, the network of community mediators, the Platform for Active Aging, Alliance of Organizations for Persons with Disabilities of the Republic of Moldova, Platform for Gender Equality and other NGO's active in the field).

In order to ensure effective and swift implementation of the support, UN Women will leverage on existing Agreements on Procurement with local vendors. UN Women has already provided similar support using project funds. The new resources will allow the extension in time of the support to the vulnerable groups as well as the inclusion of new groups at risk such as women with disabilities and families with children with disabilities.

**UN** Women in Moldova has strong networks and coordination mechanisms that are facilitated by UN Women both with the UN and with external partners. UNW program and operations staff will provide in kind support to ensure that the activities are delivered on time, on scope and on budget.

**OHCHR** has a strong and continuous partnership with the NGO community in the Republic of Moldova, including with the members of the NGO Task Force on COVID-19 and Human Rights, initiated by OHCHR at the outbreak of the pandemic. OHCHR staff will provide in kind support, by engaging in the communication with NGOs for identification of the group of beneficiaries and exact needs, and co-facilitate the communications part of the project.

The **ILO** will support the NEA in the client segmentation by revising the client registration to provide

a more comprehensive form, so that it will be possible to extract any of the variables recorded about the registered person (e.g. the person is a returning migrant, or she is a victim of domestic violence) and refer it to targeted support.

The law on Employment promotion (in force from January 2019) with a portfolio of active labour market programmes places additional demands and expectations of the capacities of the National Employment Agency and local employment offices to reach out and deliver adequate services and programmes to the target populations in the different areas of the country. This requires improved capacities of NEA to cater to those most in need of assistance to activate and integrate the labour market. Thus, the project will provide technical capacity and support for the roll out of new active labour market programs, mainly: self-employment and employment subsidy to activate and integrate the labour market the most affected individuals. Based on prior experience in partnering with NEA, ILO can quickly move into action and support implementation of employment programmes in two districts of the country (Cantemir and Causeni) and, through the local partnerships of public and private actors, together with civil society, including tripartite constituents support start-ups in higher-value-chains.

The **ILO** and **NEA** have an extensive partnership and experience in implementation of employment programmes. The project will be administratively supported and technically backstopped by ILO Decent Work Support team and Country Office for Central and Eastern Europe, based in Budapest. The local team is composed of a project manager experienced in employment and labour market, one project assistant and two local facilitators.

## Results Framework

Window 1: Proposal					Outcome Total Budget		
Outcome	The people of Moldova, in particular the most vuldecent work and productive employment, general	347,966					
	Means of verification	Responsible Org					
Outcome Indicator [max 250 characters]	# of vulnerable people who received support (and indirect beneficiaries)	0	2700	IP reports/ List of distributions	UNW, OHCHR		
	# of beneficiaries who get employed # of beneficiaries who launch start-up	0	50	Number of employment contracts; Number of newly	ILO		
Proposal outputs	1.1 People in vulnerable situation are better enhanced to protect against pandemic situation  1.2 NGOs at local level have capacities and skills to offer social support to the people in vulnerable situations  2.1 The National Employment Agency enhance capacity and knowledge to provide segmentation and referral to Active Labour Market Programmes of unemployed directly affected by COVID-19;  2.2 People in needs enrolled in NEA employment subsidy scheme and enabled to take up a job as result2.3 People have benefit of entrepreneurship and technical training, legal and mentoring support and access to small grants to business registration;						
Proposal Output Indicators	New Output Indicator (s)						
	1.1.1 # vulnerable women and men, girls and boys,	250	2700	IP reports, UNW reports,	UN Women/OHCHR		

including their dependents receiving immediate and preventive supplies (food, sanitizers, etc.), by group of vulnerability			delivery reports	
1.1.2 # of members of the NGO's equipped with relevant knowledge on PPE's use	0	50	IP reports, UNW reports	
# of informative/training sessions for CSO's staff	0	up to 5	IP reports, UNW reports	
2.1.1 # of capacity building events provided to the National Employment Agency	0	up to 10	ILO meeting reports/NEA reports	ILO
2.1.2 # of young seasonal workers and returned women migrants due to the Covid-19 crisis, enrolled in the subsidy scheme	0		NEA reports and statistics	
2.1.3. # of beneficiaries of entrepreneurship and technical training, mentoring support, small grants and legal support to business registration.			NEA reports and statistics	

## SDG Targets and Indicators

Please consult Annex: **SDG List** 

Please select no more than three Goals and five SDG targets relevant to your programme.

(selections may be bolded)

Sustai	ustainable Development Goals (SDGs) [select max 3 goals]							
$\boxtimes$	SDG 1 (No poverty)			SDG 9 (Industry, Innovation and Infrastructure)				
	SDG 2 (Zero hunger)		$\boxtimes$	SDG 10 (Reduced Inequalities)				
$\boxtimes$	SDG 3 (Good health & well-being)			SDG 11 (Sustainable Cities & Communities)				
	SDG 4 (Quality education)			SDG 12 (Responsible Consumption & Production)				
$\boxtimes$	SDG 5 (Gender equality)			SDG 13 (Climate action)				
$\boxtimes$	SDG 6 (Clean water and sanitation)			SDG 14 (Life below water)				
	SDG 7 (Sustainable energy)			SDG 15 (Life on land)				
$\boxtimes$	SDG 8 (Decent work & Economic Gr	owth)		SDG 16 (Peace, justice & strong institutions)				
	SDG 17 (Partnerships for the Goals)							
	Relevant SDG Targets and Indicators [Depending on the selected SDG please indicate the relevant target and indicators.]							
Target Indicator # and Descrip		ption	1	Estimated % Budget allocated				

munger acmeve 1000 Security and	2.2 By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons	
If hours healthy lives and hromote well-hours	3.3 By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases	
SDG 8. Nationalized target: 8.5 and	8.5 By 2030, achieve full and productive employment and decent work for all women and men, including for young people and persons with disabilities, and equal pay for work of equal value	

## Risk assessment

Event	Categories Financial Operational Organizational Political (regulatory and/or strategic)	2 – Medium High 1 - Low	Likelihood 6 – Expected 5 – Highly Likely 4 – Likely 3 – Moderate 2 – Low Likelihood 1- Not Likely 0 – Not Applicable	Impact 5 — Extreme 4 — Major 3 — Moderate 2 — Minor 1 — Insignificant	Mitigating Measures (List the specific mitigation measures)	Risk Owner	
Availability of the items for procurement needed	Operational	2	4	4	For the items which could procured locally will be procured from local market (companies) and the procurements will be in lots and provided for international suppliers	UNW, UNCT (agencies involved)	
Delayed Distribution of items/services to the final beneficiaries	Operational	2	4	5	UNW will coordinate the distribution plan with the national and local NGOs from both banks of Nistru.  The LTA with the transportation company will be applied following the security rules and recommendations of the national structures in charge of crisis responses	UNW, OHCHR, UNCT	

National Employment Agency s able to deploy staff for the project	Organisational	2 е	3	The ILO will impress the importance of the project on NEA .  Two focal points will be assigned for the project implementation		
National Employment Agency willing and able to take up new tasks and act proactively	Operational	2	3	ILO will execute project/promote training results within supportive organizational structures	ILO	

### Budget by UNDG Categories, USD

Budget Lines	Fiscal Year	Total	ILO	UN Women
Staff and other personnel	2020-21	11,663.80	5,299.80	6,364.00
2. Supplies, Commodities, Materials	2021			0.00
3. Equipment, Vehicles, and Furniture, incl. Depreciation	2021			0.00
4. Contractual services	2020-21	190,708.70	41,587.70	149,121.00
5. Travel	2020-21	3,338.56	2,811.56	527.00
6. Transfers and Grants to Counterparts	2020-21	117,148.45	117,148.45	0.00
7. General Operating and other Direct Costs	2020-21	586	1,757.23	586.00
Sub Total Programme Costs		325,201.73	168,604.73	156,597.00
8. Indirect Support Costs * 7%		22,764.33	11,802.33	10,962.00
Total		347,966.00	180,407.00	167,559.00

<sup>\*</sup> The rate shall not exceed 7% of the total of categories 1-7, as specified in the COVID-19 Response MOU and should follow the rules and guidelines of each recipient organization. Note that Agency-incurred direct project implementation costs should be charged to the relevant budget line, in line with UNSDG guidance.

# Detailed Budget

Budget Lines	DAC Codes	Description	unit	price per unit	Total EUR	Total USD
1. Staff and other personnel						
UN Women					<u>.</u>	
Communication Associate SB3.3 - 20%	72010	20% of payroll cost for the period Sept- November 2020	3	283.47	850.40	996.23
Administrative Associate G6 - 20%	72010	20% of payroll cost for the period Sept- November 2020	3	443.77	1,331.30	1,559.60
Programme Associate SC3.3 - 20%	72040	20% of payroll cost for the period Sept- November 2020	3	283.47	850.40	996.23
Short-term consultancy responsible for coordination of distribution	72040	20% of payroll cost for the period Sept- December 2020	4	600.00	2,400.00	2,811.56
Subtotal					5,432.10	6,363.62
ILO						
Project Manager Chisinau (NOB) 20%	73010	20% of payroll cost for the period Sept- November 2020	3	904.00	2,712.00	3,177.07
Project Assistant Chisinau (G4) 20%	73010	20% of payroll cost for the period Sept- November 2020	3	304.00	912.00	1,068.39
Consultancy - local facilitator (x2)	73010	20% of payroll cost for the period J Sept- November 2020	3	300.00	900.00	1,054.34
Subtotal					4,524.00	5,299.80
2. Contractual services						
UN Women						
Contract with NGO/company for provision of informative sessions	72010	Raising awareness and informative sessions for members of the CSO on proper use of PPEs, prevention related materials contextualised to local situation and target group, in two languages	1	5,000.00	5,000.00	5,857.42
Contract on food supplies	72040		1	48,500.00	48,500.00	56,817.00
Contract on hygenic items	72010		1	61,000.00	61,000.00	71,460.55

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Contract on delivery and distribution	72010		1	8,400.00	8,000.00	9,371.88
Contracts with relevant companies	72040	Contract for outreach/visibility (event, broadcasting, stickers)	1	3,000.00	3,000.00	3,514.45
Other supplies	72010		1	1,792.00	1,792.00	2,099.30
Subtotal					127,292.00	149,120.60
ILO						
Contract on consultancy services and IT support	73010	Enhanced online registration form for a better clients' segmentation directly affected by Covid - 19	1	2,000.00	2,000.00	2,342.97
Contract on entrepreneurial training provision	73010	Provision of entreprenorial training and mentorship support for 50 beneficiaries	1	5,000.00	5,000.00	5,857.42
Contract on technical (speacialized) training provision	73010	Provision of specialized trainings in two value- adding sectors (tentative: beekeeping, handicraft) for 50 beneficiaries	1	3,000.00	3,000.00	3,514.45
Contract for legal support services	73010	Legal support for the registration of 50 start-ups	1	3,000.00	3,000.00	3,514.45
Contract with local producers' associations for small grants' provision	73010	Two contracts per region signed to facilitate the access to small grants for 50 beneficiaries. 2000 EUR grant per beneficiary for start-up business. (ILO has implemented similar schemes and has proved results)	50	2,000.00	100,000.00	117,148.45
Employment subsidies	73010	Employment subsidies: (50 unemployed people x 3 months) *30% of the average wage (according to the Law on Employment Promotion 105, 14.06.18)	50	450.00	22,500.00	26,358.40
Subtotal					135,500.00	158,736.15
3. Travel						
UN Women						
Fuel costs	72010	Transportation cost for monitoring visits (2 visits/month * 2 regions * 3 months)	3	150.00	450.00	527.17
ILO					<u>-</u>	
Transportation cost	72010	Transportation cost for monitoring visits (2 visits/month * 2 regions * 3 months)	12	200.00	2,400.00	2,811.56

Subtotal					2,850.00	3,338.73
4. General Operating and other Direct Costs						
Fees for transactions based on UN Universal Price List	72010		1	500.00	500.00	585.74
Other support costs	72010		1	1,500.00	1,500.00	1,757.23
Subtotal					2,000.00	2,342.97
5. Idirect support costs						
UNW Indirect Support Costs	72010	(7% of direct cost)			9,357.19	10,961.80
ILO Administrative costs	73010	(7% of direct costs)			10,074.68	11,802.33
Subtotal					19,431.87	22,764.13
Grand Subtotal- programmable amount					297,029.97	347,966.00
TOTAL ILO						180,407
TOTAL UN Women						167,559