



The First National Report

Millennium Development Goals

in the Republic of Moldova



June 2005

This Report was produced by the Government of the Republic of Moldova with the assistance of the UN Agencies in Moldova. The Report has been approved by Government Decision no 288/15.03.2005 and published in the Official Monitor no 45-50/25.03.2005.

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List of Abbreviations

APC	- Agreement for Partnership and Cooperation
CIS	- Commonwealth of Independent States
CPI	- Consumption Price Index
DAC	- Development Assistance Committee
DOTS	- Directly Observed Therapy
DSS	- Department for Statistics and Sociology
EU	- European Union
FGT	- Foster-Greer-Thorebecke
FMTE	- Framework for Medium Term Expenses
GDP	- Gross Domestic Product
GNI	- Gross National Income
GSP	- Generalised System of Preferences
HBR	- Households' Budgets Research
HDI	- Human Development Index
HIV/AIDS	- Acquired Immunodeficiency Syndrome
IFI	- International Financial Institutions
IMF	- International Monetary Fund
ISEM	- Information System for Education Management
ISMS	- International Study for Mathematics and Sciences
LDC	- Least Developed Country
MDL	- Moldovan lei
ME	- Ministry of Economy
MICS	- Multiple Indicator Cluster Survey
MDGs	- Millennium Development Goals
NGO	- Non-Governmental Organisation
OAD	- Official Assistance for Development
OECD	- Organisation for Economic Cooperation and Development
PIES	- Project for International Evaluation of Students
PPMU	- Poverty and Politics Measuring Unit
PPP	- Power of Purchase Parity
SFEGPR	- Strategy for Economic Growth and Poverty Reduction
TPS	- Thermal Power Stations
UNDP	- United Nations Development Programme
UNICEF	- United Nations Children's Fund
UNESCO	- United Nations Educational, Scientific and Cultural Organization
USA	- United States of America
UN	- United Nations
VAT	- Value Added Tax
WB	- World Bank
WHO	- World Health Organisation
WTO	- World Trade Organisation

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Foreword



The implementation strategy of the Millennium Declaration signed by the Republic of Moldova at the Millennium Summit in 2000, envisages the common goals set by the partners at global level. The goals have been determined by monitoring specific targets and indicators of development.

Having subscribed to these intentions, the Government will build up its efforts to implement the Millennium Development Goals (MDGs), it will act on ensuring sustainable human development, poverty reduction, environmental protection, democracy and human rights protection through a more efficient coordination of the economic and social policies by 2015.

The achievement of the MDGs requires bringing together global synergies which should be included into the European accession processes thus engaging the Government in long-term quality actions which, we hope, will contribute to the development of the Moldovan society well beyond 2015.

Accepting the Millennium Declaration as the only international agenda for development and global partnerships, we embark on supporting reforms, strengthening our achievements and keeping a balance between results and contributions through efficient use of financial resources in the key areas of maximum demand towards achieving the MDGs.

The implementation of the Goals will strengthen social groups and will focus the attention of decision-makers on identifying ways to develop priority programmes in order to grow a sustainable economy which will decrease the number of people living in extreme poverty and suffering from hunger. It will maintain an advanced level of education in

the context of sustainable development and gender equality. Universal and equal access to healthcare services, decreasing the spread of diseases and gradual eradication of socially-determined diseases, especially TB, HIV/AIDS and drug addiction, should become key objectives for ensuring the quality of public health. Greater attention will be paid to the creation of decent working and living conditions for socially underprivileged young people. Setting up global partnerships aimed at international cooperation and assistance, concessional international trade and external debt relief will speed up the internal economic processes.

The desideratum for implementing the MDGs has determined the need to establish national priorities in order to include them in the development agenda of the country and in the first National MDGs Report for the Republic of Moldova, and looks at the country's performance in relation to the MDGs. It also identifies and localizes issues, analyses actions and provides concrete proposals for accelerating the achievement of planned activities.

Our efforts will be aimed at:

- halving the number of people affected by severe poverty by 2015;
- ensuring that all children attend and graduate from secondary school;
- reducing the mortality rate of under-fives;
- improving maternal health and reducing maternal mortality;
- preventing and decreasing the spread of HIV/AIDS by 2015;

- including the principles of sustainable human development in the country's policies and programmes, minimising the loss of natural resources by increasing forest areas and extending protected natural areas in order to preserve biological diversity; gradually increasing the population's rate with permanent access to safe water;
- defining our own strategy for attracting investments to improve information technology and communication infrastructures, to extend mobile phone lines, and to increase the use of the Internet, etc.

The anticipated plans relating to the MDGs, aim at creating internal conditions, with the support of external partners, in order to achieve key preferences in external economic relations which will accelerate investments, effect the management of youth labour (which has been effected by increasing migration during recent years) and increase access to information and communication through modern technologies. Special attention will be devoted to solving sustainable development issues with focus on reducing territorial discrepancies, fair distribution of benefits, changing the current production and consumption patterns, etc.

To set clear objectives, each goal is accompanied by indicators and specific targets, which will be gradually monitored. The indicators become essential both at country level, as measuring tools for progress made by society and governance, and internationally since they represent commitments, which need to be fulfilled.

The evidence of indicators and their monitoring should occur in the communities facing outstanding social problems as the situation varies from one region to another. The problems are then to be centralised in order to adjust national strategies in the respective areas. In this context, the first National Report "Millennium Development Goals in the Republic of Moldova" sets the goals for key development issues in specific areas, for imminent implementation of social effort and it also sets relevant indicators which will allow progress assessment in achieving the MDGs. The MDGs Report will serve as a strengthening tool for society and governance in view of building the prosperous country we desire.

In our country, the responsibility of monitoring the MDGs will fall on the Government with support from the UN office in Moldova and the civil society which has the moral obligation to continue the cooperation with the civil society's organisations in order to ensure a better future. Through discussions and seminars, the organisations from Moldova are invited to contribute to public awareness regarding the benefits of implementing the MDGs, and ensure the participation of all social groups in the decision-making process followed by effective involvement of the population in the implementation of the MDGs' national action plans and in making efforts to achieve them.

We would like to express our appreciation to the UN office and UN Agencies in the Republic of Moldova for the guidance and support they provided to the state institutions and non-governmental organisations in the process of preparing the first MDG National Report for Moldova and of identifying the key development actions.

During the process of turning the Millennium Development Goals into reality in our country we count on the support of central and local public authorities, state institutions, scientific community and non-governmental organisations. We hope to form partnerships with all those interested in the private sector and with those members of the society who would like to join this initiative in order to achieve the MDGs, thus bringing a very important contribution to the prosperity of the country.

I hope that the MDG Report, in its obvious intention to present a generalised synthesis of future pathways aimed at stopping the decline and encouraging economic growth in line with domestic priorities as well as with external requirements of the donor community, will have a positive impact on its implementation in Moldova.



Vasile TARLEV,
Prime-Minister

I. The Millennium Development Goals in the Republic of Moldova by 2015

Targets and Indicators for Monitoring

The First Annex to Government Decision no 288 from the 15th of March 2005

No. d/o	Goal	Targets	Indicators for monitoring
1	2	3	4
1.	Eradicate extreme poverty and hunger	<p>1. Halving the rate of people with a daily income below 2.15 USD per day (PPP values) between 1997 and 2015 Reducing this rate from 39.8%, in 2002, to 28% in 2006, to 23% in 2010 and to 18% in 2015</p> <p>2. Halving the rate of people who suffer from hunger, between 1998 and 2015</p>	<p>1. Proportion of population with a daily income below 2.15 USD (PPP values)</p> <p>2. Poverty gap ratio (incidence x depth of poverty)</p> <p>3. Rate of the poorest quintile in national consumption</p> <p>4. Rate of underweight under-fives</p> <p>5. Rate of population below the minimum level of dietary energy consumption (2,282 Kcal/day)</p>
2.	Achieve universal access to secondary school education	<p>3. Ensure that all children attend secondary school Increasing the enrolment ratio in secondary school education from 88% in 2002, to 88.9% in 2006, to 93.8% in 2010 and to 100% in 2015</p>	<p>6. Net enrolment ratio in secondary school education</p> <p>7. Rate of children who graduate from secondary school</p> <p>8. Literacy rate of 15 to 24-year olds</p> <p>9. Proportion of children in pre-school institutions</p>
3.	Promote gender equality and empower women	<p>4. Broadening women's participation in social life</p>	<p>10. Proportion of seats held by women in the Parliament</p> <p>11. Leaders and officials in public administration, economic and social organisations</p> <p>12. Ratio of women's wages to men's</p>

1	2	3	4
4.	<p>Reduce child mortality</p>	<p>5. Reducing the mortality rate of under-fives by two-thirds by 2015</p> <p>Reducing the mortality rate of under-fives from 18.3 (per 1,000 live new-borns) in 2002 to 15 in 2006, to 11.9 in 2010 and to 8.4 in 2015</p> <p>Reducing the infant mortality rate from 14.7 (per 1,000 live new-borns) in 2002 to 12.1 in 2006, to 9.6 in 2010 and to 6.3 in 2015</p> <p>Increasing the rate of children over 2 years vaccinated against measles from 99.2% in 2002 to 100% beginning with 2006</p>	<p>13. Mortality rate of under-fives</p> <p>14. Infant mortality rate</p> <p>15. Proportion of 2-year-olds immunized against measles</p>
5.	<p>Improve maternal health</p>	<p>6. Reducing the maternal mortality ratio by three quarters by 2015</p> <p>Reducing the maternal mortality ratio from 28 (per 100,000 live newborns) in 2002 to 23 in 2006, to 21 in 2010 and to 13.3 in 2015</p> <p>Providing all maternity hospitals with qualified medical staff beginning with 2006 (nowadays the proportion is 99%)</p>	<p>16. Maternal mortality ratio</p> <p>17. Proportion of births attended by trained health personnel</p>
6.	<p>Combat HIV/AIDS, tuberculosis, malaria and other diseases</p>	<p>7. Preventing and decreasing the spread of HIV/AIDS by 2015</p> <p>Reducing HIV/AIDS cases from 4.66 (per 100,000 people) in 2006 to 3.5 in 2010 and to 3.2 in 2015.</p> <p>Reducing HIV cases among 15 to 24-year-olds from 6 in 2002 to 4.9 in 2006, to 4.2 in 2010 and to 4 in 2015</p>	<p>18. HIV/AIDS incidence</p> <p>19. HIV incidence among 15-to-24-year-olds</p> <p>20. Contraceptive prevalence rate</p>

1	2	3	4
		<p>8. Preventing and decreasing the incidence of tuberculosis and malaria by 2015 Reducing the mortality rate associated with tuberculosis from 15.8 (per 100,000 people) in 2002 to 12 in 2010 and to 7 in 2015</p>	<p>21. Prevalence and mortality rate associated with malaria 22. Rate of population residing in malaria risk areas using effective malaria prevention and treatment methods 23. New cases of active tuberculosis 24. Mortality rate associated with tuberculosis 25. Rate of tuberculosis cases detected and treated under DOTS (Directly Observed Therapy)</p>
7.	<p>Ensure environmental sustainability</p>	<p>9. Integrating the principles of sustainable development into the country's policies and programmes and minimising the loss of environmental resources Increasing the rate of forested land from 10.3% in 2002 to 11% in 2006, to 12.1% in 2010 and to 13.2% in 2015 Increasing the rate of protected natural areas for the conservation of biological diversity from 1.96% in 2002 to 2.1% in 2006, to 2.2% in 2010 and to 2.4 in 2015</p>	<p>26. Proportion of forested land 27. Protected areas to maintain biological diversity 28. GDP per unit of conventional fuel consumption at current prices 29. Carbon dioxide emissions from fixed and mobile sources, kg/per capita: chlorofluorocarbon which damages the ozone layer and CO₂ gases that lead to global warming</p>
		<p>10. Halving the proportion of people without permanent access to safe water by 2015 Increasing the rate of the population with permanent access to safe water sources from 38.5% in 2002 to 47.4% in 2006 to 57% in 2010 and to 68.5% in 2015</p>	<p>30. Proportion of population with permanent access to safe water</p>
		<p>11. Halving the number of people without access to improved sanitation by 2005</p>	<p>31. Proportion of people with access to improved sanitation</p>
8.	<p>Create a global partnership for development</p>	<p>12. Further developing an open, rule-based, predictable, non-discriminating trading and financial system through promoting exports and attracting foreign investments</p>	<p>32. Exports with high added value, million USD 33. Import of cars, machines and equipments, million USD 34. Proportion of international commercial transactions based on free exchange agreements, total of transactions</p>

		<p>35. Rate of commercial balance deficit in GDP</p> <p>36. Rate of foreign companies operating in the country</p> <p>37. Foreign Direct Investments (FDI), USD per capita</p> <p>38. Turnover of “de novo” companies with foreign capital</p> <p>39. Proportion of Official Direct Assistance for basic social services (basic education, primary health care, nutrition, safe water and sanitation)</p>
	<p>13. Addressing the needs of the Republic of Moldova as a landlocked country through modernizing the transport and customs’ infrastructure</p>	<p>40. Transport capacity of the international road traffic</p> <p>41. The investment rate in transportation total investments</p> <p>42. The investment rate in the development of air and naval transport, total of investments</p> <p>43. Traffic capacity of border customs</p> <p>44. Rate of Official Assistance for Development (OAD)</p>
	<p>14. Restructuring and managing the external debt problem</p>	<p>45. Public external debt, % of GDP</p> <p>46. Public external debt service, % of budget incomes</p>
	<p>15. Developing and implementing youth strategies</p>	<p>47. Unemployment rate of 15-to-24-year-olds</p>
	<p>16. Providing access to affordable, essential medicines in cooperation with pharmaceutical companies</p>	<p>48. Proportion of population with access to affordable essential medicines on a permanent basis</p>
	<p>17. Building up an informational society</p>	<p>49. Telephone lines and mobile subscribers per 100 inhabitants</p> <p>50. Personal computers in use per 100 inhabitants</p> <p>51. Internet users per 100 inhabitants</p>



II. Introduction

2.1. The Necessity of Millennium Development Goals

The President of the Republic of Moldova together with the heads of states and governments from 147 countries (out of a total of 191) signed the “United Nations Millennium Declaration: Human Development – A Goal of Major Importance” in New York in 2000. This document reaffirms the international community’s belief in the fundamental values of humankind – freedom, equality, solidarity, tolerance, respect for the environment and shared responsibilities – and it emphasises the importance of resolving major issues concerning peace reinforcement, protection of human rights, assurance of sustainable development and environmental protection.

The Millennium Development Goals (MDGs), which briefly define the goals to be achieved by 2015 and derive from the Millennium Declaration are:

- eradicate extreme poverty and hunger;
- achieve universal access to secondary school education;
- promote gender equality and empower women;
- reduce child mortality;
- improve maternal health;
- combat HIV/AIDS, tuberculosis, malaria and other diseases;

- ensure environmental sustainability;
- create a global partnership for development.

Specific targets and monitoring indicators have been set for each of these Goals. Obviously these goals, targets and indicators, set forth at a global level, should be tailored to each country’s priorities and specific context and therefore, they should not be used as a rigid directive.

According to the *Human Development Report for 2004*¹, commissioned by the United Nations Development Programme, the Republic of Moldova is a country with medium human development.

The formation process of the new independent state, based on the values of authentic democracy, has been very difficult. The degradation of the quality of life, the high unemployment rate, the consequences of the military conflict in Transnistria, the slow and inefficient privatisation of state property have had a deep impact on the evolution of the Republic of Moldova during the past ten years. At the peak of the crisis (in 1999) the average monthly salary in real terms was approximately 25% of the average level recorded in 1990 while the average pension was approximately 17%. The unemployment rate, calculated in accordance to the methodology of the International Labour Bureau, reached 11.1%.

¹ *The Human Development Report for 2004 uses statistical data collected during 2002.*

The deterioration of the quality of life and conditions for the majority of Moldovan citizens generated changes in the demographic evolution of the population. During the 90s, the birth and life expectancy rates decreased and the mortality rate increased. As a result of this trend, beginning with the middle of the 90s, the country's population has been decreasing.

To reverse the negative trends in the evolution of the country, the Moldovan authorities have initiated a series of structural and institutional reforms, which began to yield results only at beginning of the new millennium. Thus, between 2001 and 2003, for the first time after the declaration of independence, the Republic of Moldova recorded a substantial improvement in the economic and social indicators. In real terms, the GDP increased by 21.6%, the average monthly salary by 70.1% and the monthly average pension by 93%.

Overall, the Republic of Moldova has obtained certain results in achieving the Millennium Development Goals, especially in education and gender equality, but it still has to make continuous efforts to eradicate poverty, improve child health and combat tuberculosis and HIV/AIDS.

The Government of the Republic of Moldova, with the help of the United Nations Development Programme in Moldova, initiated a series of studies and workshops which analysed the ways of adapting the targets and indicators derived from the *Millennium Declaration* to the particularities of our country. The outcome of these activities materialised into detailed studies in each of the areas defined by the eight goals during the National Workshop which took place at the end of 2003. The studies were distributed to working groups within interested ministries and departments, to the academic community and to representatives of the civil society. Also, to guarantee a broader participation of Moldovan citizens in defining the development goals and targets of our country at the beginning of the millennium, the developed studies and recommendations were published both in print and electronically, and discussed during many conferences, seminars and discussion groups.

2.2. The Principles Sustaining MDGs Elaboration and Implementation

The Government of the Republic of Moldova considers that by signing the United Nations Millennium Declaration it subscribes with full responsibility to the achievement of the Millennium Development Goals and to the assurance of sustainable human development and poverty reduction, environmental protection, good governance, democracy and human rights protection through a more efficient coordination of the economic and social policies by 2015.

The achievement of the MDGs requires bringing together global synergies and those involved in the European accession processes, thus engaging the Government into long-term quality actions which will ensure the development of Moldovan society.

Accepting the Millennium Declaration as the only global agenda for global development and partnerships, we will promote reforms and reinforce our achievements, maintain the balance between results and contributions through efficient use of financial resources in the key areas of maximum necessity in order to achieve the MDGs.

Universal and equal access to healthcare services, decrease of the spread of diseases and gradual eradication of socially-determined diseases, especially TB, HIV/AIDS and drug addiction will become the key objectives for ensuring the quality of public health. Greater attention will be paid to the creation of decent working and living conditions for socially underprivileged youths. Creation of global partnerships aimed at international cooperation and assistance, concessional international trade and external debt relief will speed up internal economic processes.

The desideratum of achieving the MDGs has determined the need to set national priorities in order to include them into the country's development agenda and into the first MDG National Report for the Republic of Moldova. It has also created the need to evaluate the country's

performance in relation to the MDGs, to identify and localise issues, to analyse actions and to forward precise proposals regarding the acceleration of planned activities.

Our internal efforts will be aimed at:

- halving the number of people affected by severe poverty by 2015;
- ensuring all children attend and graduate from secondary school;
- reducing the mortality rate of under-fives;
- improving maternal health and reducing maternal mortality;
- preventing and reducing the spread of HIV/AIDS by 2015;
- including the principles of sustainable human development into the country's policies and programmes, minimising the loss of environmental resources by increasing forest areas and extending protected natural areas in order to preserve biological diversity, gradually increasing the population's rate with permanent access to safe water;
- defining our own strategy for attracting investments to improve information technology and communication infrastructure, to extend mobile phone lines, and to increase the use of the Internet, etc.

The anticipated actions, correlated with the MDGs, aim at creating proper internal conditions which, with the support of external partners, will accelerate investments, effect the management of youth labour, which has been effected by increasing migration during recent years, and increase access to information and communication through modern technologies. Special attention will be devoted to solving sustainable development issues with a focus on reducing territorial discrepancies, fair distribution of benefits changing the current production and consumption patterns, etc.

To set clear objectives, each goal is accompanied by indicators and specific targets, which will be gradually monitored. The indicators become essential both at country level, as a measuring tool for progress made by society and governance, and internationally since they represent commitments, which need to be fulfilled.

The evidence of indicators and their monitoring should occur in the communities facing outstanding social problems as the situation varies from one region to another. The problems are then to be centralised in order to adjust national strategies in the respective areas. In this context, the first National Report "Millennium Development Goals in the Republic of Moldova" sets the goals for key development issues in specific areas, for imminent implementation of social effort and it also sets relevant indicators which will allow assessment in achieving the MDGs. The MDG Report will serve as a strengthening tool for society and governance in view of building the prosperous country we desire.

The priorities, the intermediary and the final goals which are tailored to the specific context of the Republic of Moldova, have been included in the *Economic Growth and Poverty Reduction Strategy*, thus reaffirming the commitment of our country to make sustainable efforts to achieve the MDGs.

The purpose of the Report, structured by goals and targets, is to place the key problems related to the achievement of the MDGs at the top of the public agenda.

The implementation of the Goals will strengthen social groups and will focus the attention of decision-makers on identifying ways of developing priority programmes in order to grow a sustainable economy which will decrease the number of people living in extreme poverty and suffering from hunger, and will maintain an advanced level of education in the context of sustainable development and gender equality.

2.3. The Participation Process

The responsibility of monitoring the MDGs will fall on the Government with support from the UN office in Moldova and the civil society which has the moral obligation to continue the cooperation with the civil society's organisations in order to ensure a better future. Through discussions and seminars, the organisations from Moldova are invited to raise the public awareness on the benefits of implementing the MDGs, and to ensure the participation of all social groups in the decision-making process followed by an effective involvement of the population in the implementation of the MDGs national action plans. This effort will achieve the millennium goals.

During the process of turning the Millennium Development Goals into reality in our country we count on the support of central and local public authorities, state institutions, scientific community and non-governmental organisations. We hope to form partnerships with all those interested in the private sector and with those members of the society who would like to join this initiative in order to achieve the MDGs, thus bringing very important contribution to the prosperity of the country.

At the end of the 90s, the democratic and national freedom movement intensified in Moldova, at that time part of the Soviet Union, and culminated on the 27th of August, 1991 with the declaration of independence. The independence of the Republic of Moldova was accepted by the international community and our country became a member of a series of prestigious international organisations, and first of all, of the United Nations Organisation.

The Constitution of the Republic of Moldova was adopted in 1994. According to the Constitution, the Republic of Moldova is a democratic state with rule of law, where all people are guaranteed human rights and freedoms, free development of human personality, as well as justice and political pluralism. All citizens of the Republic of Moldova are equal before the law and public authorities, regardless of their race, nationality, ethnic origin, language, religion, sex, opinion, political affiliation, wealth or social origin. The Constitution of the Republic of

Moldova guarantees every citizen's right to a decent life, information, education, health protection and healthy environment.

According to the *Human Development Report for 2004*², commissioned by the United Nations Development Programme, the Republic of Moldova is a country with medium human development. It is placed on the 113th position out of 177 countries, between Vietnam and Bolivia.

The 2002 Human Development Index (HDI) value for the Republic of Moldova (0.681)³ is below the global average (0.729). All Central and Eastern European countries have a higher HDI than the Republic of Moldova. Among former Soviet countries the Republic of Moldova is the second to last outrating only Tajikistan.

As far as the three components of the HDI are concerned, the situation in the Republic of Moldova is different. Thus, life expectancy at birth (68.1 years) is higher than the world average (66.9 years), but it is lower than in other Central and Eastern European countries and CIS (69.5) and it is much lower than in the developed countries (77.1 years).

As to the education index, the Republic of Moldova has recorded a lower gross enrolment rate for all levels of education (62%) than the world average (64%), the average in Central and Eastern European countries and CIS (79%) and in OECD countries (87%). It is worth mentioning that the available information is contradictory, because the gap between the statistical data provided by international (62%) and national organisations (70.7%) is high.

² The *Human Development Report for 2004* uses statistical data collected during 2002.

³ The data provided by international and national statistical bodies may differ. Hereinafter, to avoid ambiguity, the analysis requiring comparisons between the indicators of various countries shall be based on the data provided by global reports. For other purposes the analysis is based on data provided by the Department of Statistics and Sociology of the Republic of Moldova.

In 2002 the Republic of Moldova recorded a GDP per capita of 1,470 USD (PPP values)⁴, which is 5.3 times lower than the world average (7,804 USD at PPP values). Moreover, the GDP per capita in the Republic of Moldova is under the average of all world regions, except Sub-Saharan Africa (1,790 USD at PPP values). In 2002, about 40% of the population was under the absolute poverty line and had a daily income below 2.15 USD (PPP values).

The Government of the Republic of Moldova expresses its hope that the recommendations of the Report will help promote human development values and mobilise the society in order to achieve the goals derived from the Millennium Declaration.

⁴ For 2002, the Gross Domestic Product (taking into account data available at the Statistics and Sociology Department) was 2,428 USD, at PPP values.



III. The Millennium Development Goals

Goal 1: Eradicate Extreme Poverty and Hunger

Targets	Indicators
<p>Target 1: Halving the rate of people with a daily income below 2.15 USD (PPP values) between 1997 and 2015. Reducing this rate from 39.8%, in 2002, to 28%, in 2006, to 23% in 2010 and to 18% in 2015.</p>	<p>1. Proportion of population with a daily income below 2.15 USD (PPP values) 2. Poverty gap ratio (incidence x depth of poverty) 3. Rate of the poorest quintile in national consumption</p>
<p>Target 2: Halving the rate of people who suffer from hunger between 1998 and 2015.</p>	<p>4. Rate of underweight under-fives 5. Rate of population below the minimum level of dietary energy consumption (2,282 Kcal/day)</p>

Target 1: Halving the Rate of People with a Daily Income below \$2.15 (PPP Values) between 1997 and 2015

Situation Analysis

Poverty in the Republic of Moldova is a multidimensional phenomenon, common in most countries embarked on the process of profound political, economic and social transformation and it is associated with factors and features such as: (i) low level of income and consumption, (ii) insufficient and inadequate nutrition, (iii) bad health condition, (iv) limited access to education, (v) vulnerability to natural disasters and economic crises, to social and political instability associated with fear for the

future, (vi) limited participation in the decision-making process, (vii) and lack of opportunities to improve living standards. At the same time, poverty in Moldova is a very serious problem as it is characterized by specific features and risks.

According to the methodology used in the Republic of Moldova, poverty indicators are calculated on the basis of the population's consumption level: a person is considered poor if he/she consumes under a certain level, called *poverty line*. Currently, several indicators are used to describe poverty in Moldova. Here are the most important ones:

Extreme poverty line represents the amount of money needed to ensure energy consumption of 2,282 Kcal per day per person. The composition and the

price of food products are established on the basis of consumption model of poor people (2-4 deciles of the total consumption distribution per capita). In 2003 the extreme poverty line was set at 235.46 Moldovan lei.

Absolute poverty line represents necessary amount of money for ensuring energy consumption of 2,282 Kcal per day and purchasing of necessity items. The composition and price of necessary items are established on the basis of the consumption model of poor people. In 2003, the absolute poverty line was set at 303.52 Moldovan lei.

International poverty line is defined for Moldova as a daily income of 2.15 USD (PPP values).

The rate of population under a certain poverty line – this rate is calculated for extreme poverty, absolute poverty and, in case of international and regional comparisons, for the poverty line of 2.15 USD daily income (PPP values).

Depth and incidence of poverty is calculated for each of the poverty lines mentioned above. Poverty depth shows the difference between the population's real consumption and the poverty line thus describing the deprivation level of the poor. In turn, poverty incidence characterizes the existing inequalities among the poor.

The analysis of statistics related to the main indicators shows that any changes in the social-economic sector have direct impact on the dynamics of poverty. Thus, in 1998 the extreme poverty rate was estimated at 37.4%, the poverty depth at 12.4% and the poverty incidence at 5.9%. The regional financial-economic crisis in 1998 seriously affected the living standards of the Moldovans. As a result, the highest level of poverty in our country was recorded in 1999, when it reached the level of 59.7%, 1.6 times more than the previous year. Special attention should be paid to the fact that the growth rate of the poverty depth exceeded the growth of the poverty rate. This indicates that extreme poverty growth was accompanied by an alarming increase in the number of people whose consumption level was lower than the extreme poverty line. The economic growth that began in 2000 had a positive impact and led to the reduction of poverty in the country: poverty rate set at 52.2% and poverty depth at 17.6%. The

far-reaching actions taken by the Government allowed the rise in salaries, pensions and doles, and together with reduced inflation (5% per year), it led to a change in poverty dimensions so that in 2002 the extreme poverty rate was about one third lower (down to 26.2%) than in 1998. In 2003 the level of poverty (15%) was lower than in 2002.

The dynamics of the poverty index for a population is set at a daily income of one dollar (PPP values in 2003 – 108.07 lei per month). The analysis of the dynamics points to the fact that in 1998 the incomes of 22.9% of the population were less than one dollar per day (PPP values) and the poverty depth was 9.7%. Following the financial-economic crisis in 1998, the population's incomes decreased and the rate of poverty increased more than 1.5 times in 1999, thus reaching 34.8%. Beginning in 2000, favourable results can be seen in poverty reduction: the rate of poverty went down to 26.3% and the poverty depth to 10.5%. The actions taken by the Government between 2001 and 2003 aimed at raising the living standard and led to a change in poverty aspects. In 2003, the rate of poverty decreased 3.3 times compared to 1998 (the incomes of 7.0% of the population were less than one dollar per day – PPP values) and the poverty depth decreased to 2.6%, representing one quarter of the level in 1998.

The dynamics of poverty for people with a daily income lower than 2.15 dollars (PPP-values, in 2003 – 216.16 lei per month) had the same trend. In 2003 the rate of poverty decreased 1.8 times compared to 1998 and reached 28.9%. The poverty growth reduced 2.5 times and the poverty depth 3.0 times compared to 1998.

Targets for 2005-2015

The Republic of Moldova sets the following *targets* to eradicate extreme poverty and hunger:

1. Halving the rate of people with a daily income below 2.15 dollars (PPP values) between 1997 and 2015.

The achievement of this target is structured in time as it follows:

- Reducing the rate of population with a daily income below 2.15 dollars per day (PPP values) from 39.8% in 2002, to 28% in 2006, to 23% in 2010 and to 18% in 2015;

2. Halving the rate of people who suffer from hunger between 1998 and 2015

The targeted values of this indicator for 2006, 2010 and 2015 will be established during the development of the calculation methodology for the rate of population below the minimum level of food consumption set at 2,282 Kcal/day.

Barriers

The main obstacles in achieving the set targets are the following:

- *unstable macro-economic environment* which intimidates possible investors and impedes business start-ups and undertakings;
- *fragile positive economic outcomes* resulting from the implementation of structural and institutional reforms in the past years;
- *incoherent and inconsistent reforms*, tendencies to revive economic practices based on the administrative management of economy;
- *vulnerability of the national economy* in case of natural disasters, caused by its agricultural and food processing orientation;
- *regional discrepancies* caused by controversial restructuring of many enterprises and by delaying reforms in the agricultural sector;
- *unemployment and workforce migration*, which diminishes the proportion of economically active population and has serious repercussions on the human potential in the key areas of national economy;
- *deficient social protection system*, which is not always focused towards meeting the needs of the poor;
- *lack of methodologies and institutional abilities* to collect statistical data, assess and forecast "The rate of population below minimum level of dietary energy consumption (2,282 Kcal/day)" index.

Primary Actions for Achieving the Planned Targets

Given that poverty reduction is one of the key goals of the Government, the Republic of Moldova will continue to maintain the social character of its economic policies focusing on increasing the quality of living standards, improving social protection of the poorest people by accurate distribution of social assistance, facilitating access to social services for

the poor, developing the social security system and creating new jobs, especially for the poor.

Medium Term Actions for 2005-2006

- *comprehensive and continuous economic growth*;
- *reducing poverty and inequity*, extending the participation of the poor to economic development;
- *developing human resources*.

The set goals will be achieved by taking the following actions:

- monitoring the impact of the social programmes over the population's welfare;
- improving the current system of social assistance (starting with the nominative compensations system) by gradual implementation of the beneficiaries' incomes evaluation;
- creating the necessary legislative framework, identifying responsibilities and procedures of certain institutions. External support will be sought in order to develop the specifics of the criteria for evaluating poverty, the model of evaluation for each household's welfare, and the other necessary instruments;
- creating the primary network of diversified social services according to the Law on Social Assistance and The National Strategy for Family and Child Protection; endorsing and implementing the minimal quality standards of the social services for residential institutions and community centres;
- directing social expenses in favour of the poor by improving the financing systems of the care-for-health-and-education system;
- facilitating poor people's access to social services;
- assisting certain families and citizens to surpass poverty by developing a small business;
- increasing the number of jobs, helping vulnerable social categories in obtaining a job;
- creating a unique database for social assistance beneficiaries, including the methods of anthropometrical measurement and the collection of necessary statistical data needed for calculating the rate of under-fives whose weight is below the limit;

- developing and implementing modern methodologies of collecting and processing the necessary statistical data for monitoring the progress of eradicating extreme poverty and hunger and in particular, the ratio of population below the minimum level of dietary energy consumption (2,282 Kcal/day).
- reinforcing partnerships between public administration authorities, civil society, employers, and international organisations active in Moldova in order to extend the opportunities provided to the poor in education, health care, employment, setting up own businesses;

Long Term Actions by 2015

- *constant growth of the quality of life*, especially for the poor;
- *rapid outrunning of the unjustified social differences*, including the eradication of extreme poverty and hunger.

The set of goals will be achieved by taking the following actions:

- maintaining high rates in economic growth, achieved in the past years by including the national economy into regional, European and global financial and human structures and fluctuations;
- developing and implementing regional development programmes, in particular in rural areas and small towns; extending and modernizing regional infrastructures, rehabilitating the production units of public utilities and housing facilities, improving the quality of social services provided to the poor;
- developing the abilities of local public authorities in order to identify social problems, develop and implement social policies and programmes, evaluate and monitor them;
- monitoring the results of social programmes in order to improve the rules by which social assistance is provided, to rationalize types, structures and duration of social assistance programmes, to improve their quality, to diversify the social protection types and to adjust them to a minimum standard of quality;
- initiating social work for the poor, which will require elaboration and approval of the criteria for assessing poverty, methods of evaluation for households' welfare and other necessary instruments;
- re-evaluating, consolidating and improving the juridical norms used as framework in social assistance so that they focus on vulnerable people;
- taking efficient coordination measures and actions in social protection, especially in eradicating poverty at national and local levels; the actions will be taken by non-governmental organisations and by foreign donors;
- developing and implementing a unique database of social assistance beneficiaries in order to use and distribute more efficiently the financial resources to vulnerable citizens and families.



Goal 2: Achieve Universal Access to Secondary School Education

Targets	Indicators
<p>Target 3: Ensure that all children attend secondary school</p> <p>Increasing the enrolment ratio in secondary school education from 88% in 2002, to 88.9% in 2006, to 93.8% in 2010 and to 100% in 2015</p>	<p>6. Net enrolment ratio in secondary school education</p> <p>7. Rate of children who graduate from secondary school</p> <p>8. Literacy rate of 15 to 24-year olds</p> <p>9. Proportion of children in pre-school institutions</p>

Target 3: Ensure that All Children Attend Secondary School

Current Situation

The transition from centrally planned to market economy determined the need to modify the education policy in the Republic of Moldova. The main task was to build a modern and democratic national education system based on national and universal values. As a result, at the beginning of the 90s, the education system underwent democratic reforms based on new education principles clearly formulated in the *Law on Education* no 547 of 21.07.1995 (The Official Monitor of the Republic of Moldova, 1995, no 062, art 692) approved by the Parliament, in *Law no 1257-XIII* of 16.07.1997 "Regarding the evaluation and accreditation of educational institutions in the Republic of Moldova" (The Official Monitor of the Republic of Moldova, 1997, no 69-70, art 583) and in the *Law no 423-XIV* of 4.06.1999 "Regarding the approval of the rules for evaluation and

accreditation of education establishments" (The Official Monitor of the Republic of Moldova, 1999, no 80-82, art 382). The Strategy for Implementing the Law on Education is stipulated by the *State Programme for Education Development between 1999 and 2005* as well as by other legislative and normative documents. The existing documents establish national quality and quantity objectives for education development, which by large are included in the Millennium Development Goals and focus on universal access to basic education and promotion of gender equality.

Based on the legal and normative framework, the structure of the education system has been updated (secondary schools, high schools, polyvalent vocational schools, colleges, new levels of post graduate education have been created) and the shift to contents with finite character at each level of education is ongoing. The Compulsory Secondary Education Reform Project, co-funded by the Government of the Republic of Moldova and the

World Bank, has made progress in developing and implementing new contents based on formative education, national and universal values and new textbooks. The Textbooks Renting Scheme is being developed and most teachers have been trained in implementing the new contents and new teaching techniques. A new professional evaluation system for academic results is currently being created. According to the Economic Growth and Decrease of Poverty Strategy the main goal in education is to ensure access to national quality services, to have a long-lasting education system and to enhance this goal in the human resources development.

However, in spite of the achieved results, the education system is facing several serious problems related primarily to the insufficient funding of education institutions. Thus, while prior to 1996 the education system received about 28% of the consolidated budget (approximately 10% of GDP), after the economic crisis in 1998 this index has reduced considerably. In 1999, the education system received only 16.4% of the total amount of budget expenditures, i.e. 4.7% of GDP.

Currently only 52% of children between 1 and 6 attend pre-school institutions, this having a negative impact on the level of children's preparation for school. The net enrolment ratio of children in primary education decreased from 94% in 1999 to 92.7% in 2002, and in the case of secondary school education it increased from 87% in 1999 to 87.9% in 2002. Each fifth graduate from secondary schools did not continue further education.

Taking into consideration the low budget for education, state educational institutions have introduced a system of education fees and equally, private educational institutions have been created. At present, 55% of universities and 24% of special intermediate educational institutions are private. Approximately 77% of the students in state universities pay education fees which vary between 3,000 and 9,000 lei.

At present there are 63 boarding schools in the country with 11,457 children out of which 35% are orphans and 65% come from poor families, most of them having major health problems which require qualified psycho-pedagogic assistance and constant medication, such services being unavailable in the circumstances created by the present financing system.

There are essential differences regarding access to education in rural and urban areas. The ratio of children with secondary school education coming from rural areas is 76%, those with higher education is 6%, while the ratio of children from urban areas is 81% and 29%. About 250 rural communities, where there are approximately 10,000 children, do not have their own educational institutions, 60 localities have only primary schools where 1,700 pupils study, and 500 communities have only secondary schools. The main problems faced by rural schools are a shortage of teachers and school libraries, and inadequate infrastructure. Only 30% of rural teachers have a teaching degree, 50% do not have any special training and 65% teach three school subjects.

According to the estimations of the Ministry of Education, in cities there are secondary school classes of about 24 pupils, while in smaller towns there are 15 pupils or less. Only 55 primary schools and 219 small secondary schools operate in the Republic of Moldova, i.e. 48% and respectively 33% of the existing educational institutions of this type. In 50 primary schools and 38 small secondary schools there are primary classes with simultaneous teaching due to the small number of pupils.

Most small rural schools run in old, converted buildings which have not been repaired in years and which do not have enough space, therefore classes are taught in two shifts. Local public authorities often have no money allocated for these schools.

The capacity of educational institutions is used only in proportion of 75% and the decrease of students by 40% until 2010 will impose optimising the network. Bad management is also a cause of the low enrolment ratio in secondary schools. A system of formation and continuous development of school managers and teachers is necessary.

According to the Multiple Indicator Cluster Survey (MICS) run by UNICEF, people between 15 and 24 years old have a literacy rate of 98.7%, the rate of pupils in first class who reach the fifth class is 98.5% and pupils graduating from secondary school represent 87.1% and will reach 90% in 2005, 93% in 2010 and 95% in 2015. In practice there are no differences between urban and rural areas or between genders. Still, the values of this indicator depend on the level of households' welfare: 96.4% of the poorest and 100% of the richest quintile.

Nowadays, following the alignment of education statistics to UNESCO standards, the initial reports regarding the activity of educational institutions contain indicators which group students' contingent by class, age and gender. This data helps to calculate the net enrolment ratio in secondary school education (*indicator no.6*).

As to the achievement of the MDGs concerning education, we have concluded that at present neither the Ministry of Education nor the Department for Statistics and Sociology can calculate efficiently and exactly the rate of pupils who, after being enrolled in the first grade, graduate secondary school (*indicator no.7*), and the level of literacy for people between 15 and 24 years.

The Ministry of Education is due to create The Information System for Education Management (ISEM) whose general purpose is the delivery of necessary data and reports for adequate decision-making. This will include collecting statistical reports, processing and storing them, as well as elaborating standard and specific reports needed when evaluating public policies.

Targets for 2005-2015

In line with the stipulations of the Law on Education, which specifies that secondary school education is compulsory, since primary schools are highly attended, the Republic of Moldova sets the possibility for all children to attend secondary school education as a main target in education development.

This target will be achieved through the implementation of the Economic Growth and Decreasing Poverty Strategy, of the Framework for Expenses on Long Term and of the "Education for All" Strategy and will be phased during the next years so that the net enrolment ratio in secondary school education will exceed 88.9% by 2006, 93.8% by 2010 and will reach 100% by 2015.

It has also been planned an increase of the enrolment ratio in pre-school programmes to 75% by 2007 (for children of 3-5 years old) and to 100% for children of 6 to 7 year old as well as to reduce, to less than 5%, the discrepancies between rural and urban areas, between vulnerable groups and people with average incomes, during the same period of time.

Barriers

The main obstacles in achieving this target are:

- *lack of a coherent doctrine in education policies* refractory to political circumstances, which would specify the competencies and responsibilities of local and central public authorities, teachers and parents in the organisation and management of the educational system;
- *insufficient funding of the education system*, lack of funding systems based on performance *and efficiency*;
- *there are new tendencies of polarisation of the population* due to the appearance of new social categories with limited access to quality primary and secondary school education, and to the irregular distribution of state education services by area of residence;
- *persistent issues requiring strategic interventions*: reduced access of poor families to pre-school education programmes, inadequate training and living conditions for institutionalised children, bad conditions of many small rural schools, insufficient supply of textbooks and teaching materials, and shortage of qualified teachers;
- *lack of methodologies and institutional abilities* to collect statistical data, evaluate and forecast the rate of children who graduate from secondary school (*indicator no. 7*).

Long Term Actions by 2015:

- *elaborating the "Education for All" Strategy* in order to ensure an adequate institutional and financial support, the development of education sciences and the formation system for teachers;
- *increasing access of the population*, in particular of the poor, to quality education services by primarily funding pre-school, primary and secondary school education, by using in an efficient manner technical and practical resources and available financial resources;
- *adequate distribution and allocation of resources to increase remuneration* for employees in the education sector, procurement of textbooks, teaching materials and necessary equipment for the education process;

- *optimising the educational institutions network and its development according to the demographic situation and trends*; ensuring access to quality primary and secondary school education for all children regardless of their area of residence;
- *improving the quality of primary and secondary school education* by implementing the state's education standards, improving didactic plans, programmes and methods, implementing new technologies for pupils' assessment;
- *implementing new information technologies* in primary and secondary school education; providing primary and secondary schools, regardless of their location, with modern computers and Internet access;
- *developing and implementing compulsory health support education programmes* in educational institutions: healthy behaviour for personal hygiene, prophylaxis of contagious diseases, prophylaxis of sexually transmitted diseases, building up responsible health behaviour;
- *improving the legislative frame and implementing a system to support children, especially those coming from vulnerable families* by developing community school funds and ensuring their fiscal sustainability;
- *improving the process of integration for children with special educational needs* by developing and implementing special training curricula and methods; organising a system for assisting, stimulating and supporting children with special needs in secondary schools; developing community services for assistance and support;
- *efficient management of human resources, finances and materials* within the education system by improving the normative frame, creating an information system, renewing the technical and practical resources of educational institutions and improving teachers and managers' certification system;
- *implementing a new model for training and developing teachers* in the context of the newly emerged requirements: organising simultaneous training, teaching foreign languages, working in communities with a small number of pupils, etc;
- *ensuring that all primary and secondary schools have well trained teachers* by developing and implementing support and incentive mechanisms for teachers based on performance and competitiveness ;
- *implementing awareness programmes* for parents, community members and children on the negative impact of school withdrawal;
- *mobilizing schools and communities* to take over various functions and responsibilities in monitoring major causes of absence and school withdrawal in order to prevent premature child labour and to integrate children who work in the education system;
- *mobilizing teachers, parents, school psychologists and other practitioners* to promote various educational measures aimed at reducing child vulnerability to human trafficking and involvement in criminal activities;
- *developing and implementing modern statistical data collection and processing methods* to monitor progress in education, especially the progress of children who graduate a certain level of education.



Goal 3: Promote Gender Equality and Empower Women

Targets	Indicators
Target 4: Broadening women's participation in social life	10. Proportion of seats held by women in the Parliament 11. Leaders and officials in public administration, economic and social organisations 12. Ratio of women's wages to men's

Target 4: Broadening Women's Participation in Social Life

Situation Analysis

The principle of gender equality requires protection, promotion and respect of men and women's human rights. Furthermore, gender equality implies ensuring and providing equal opportunities for women and men in all areas of activity. Gender equality is expressed through a series of specific actions leading to eliminating genders disparities, stereotypes, sexist attitudes and discrimination.

The economic field is closely related to social equality, including problems concerning poverty reduction and achievement of gender equality. Policies regarding unemployment, social insurance, social assistance, population migration, demographic situation, education and public health cannot be "gender neuter" any longer. It is essential they take gender issue into consideration. Women's active involvement alongside men in decision-making processes would ease the promotion of "gender sensitive" policies dealing with both genders' necessities.

During the past years, the Republic of Moldova has taken concrete steps towards the creation and promotion of gender equality policies.

The structure of the population is composed of 52% women and 48% men. Women represent 50.4% of the economically active population.

Almost half of the unemployed women have high education, special intermediate studies or technical studies and their average age is 30. The existing statistical data emphasises significant differences between genders regarding distribution on social-economic activities.

On January 1st 2003, the number of public servants was 29,400 people, representing 56% of the total number of employees in the public administration field. Among public servants, the percent of men was significantly higher than the percent of women, the latter being only 12,920, i.e. 43.94%. Among the public servants with the highest rank only 13% (i.e. 9 civil servants) of them were women, out of a total of 69 people. Women were dominant among public servants with ranks II and III: 2,579 women out of 4,609 people are second ranked public servants and respectively, 7,649 out of 10,792 are third ranked

public servants. The number of public servants with qualification degrees set by special laws is 12,926 people, while the number of women in this position is 5 times smaller than men's (2,603).

At present in the country's representative council of authority there are 16 women out of 101 deputies. The President of the Parliament is a woman. Women's level of participation in the Parliament of the Republic of Moldova is of 15.8%. Women hold the following decision-making positions in the Parliament: 6.3% are Ministers and 19.4% are Vice Ministers. By July 2004 there had been 2 women ministers: the Minister of Finances and the Minister of Justice; one woman is Vice Minister of External Affairs, 8 women are Vice Ministers and 2 women are Head of Departments. The President of the Supreme Court is a woman.

After the local elections in 1999 women represented 10.9% (93 women) of the 851 Mayors and 73% were Town Hall Secretaries. Only 664,600 women voted at the general elections in 2003 (58.3% of women with voting right). Following the results of the local elections in 2003, 138 women became mayors (15.4% of a total of 898 mayors). Out of the 32 existing districts only one woman was elected president. As a result of the Government and civil society's involvement, women's presence in today's Executive board has improved.

Education represents a strategic direction to promote gender equality policies. The Law on Education stipulates equal rights to education for boys and girls.

At the beginning of the university year 2002/2003 women represented 57% of all students enlisted for short time and long time university studies. The largest number of women out of students in colleges and universities is found in the fields of education (89% respectively 69%) and medicine (85% and 65%). Among all people who teach in colleges 63% are women, while in universities 51%. In higher education institutions female teachers represent 43% of the PhDs, only 10.8% are certified PhD and only 29% have a PhD in Sciences.

In order to evaluate the progress of women's situation and to undertake comparative studies we can use the *Gender Development Indicator* and the *Women's Participation to Social Life Indicator*.

- *The Gender Development Indicator* uses the same variables as the *Human Development Indicator*, but the variables are modified in connection with the inequalities between men and women's development: life expectancy at birth, adult population's literacy rate, the enrolment ratio in primary, secondary and higher education and the standard of living.
- *Women's Participation to Social Life Indicator* is determined by the number of women involved in public life compared to men's. The indicator is calculated based on four variables: the ratio between women and men's incomes, the percentage of women employed in the public sector, including the management level, the number of seats held by women in the Parliament and the rate of women employed in positions requiring high qualifications.

The legislative framework

According to article 16 paragraph 2 in the Constitution of the Republic of Moldova "all citizens of the Republic are equal before the law and public authorities, with no discrimination regarding race, nationality, ethnic origin, language, religion, sex, personal opinions, political affiliation, income or social origin".

The Legislation of the Republic of Moldova does not contain discriminatory aspects towards women. Therefore it guarantees them equal rights and liberties in the economic, social, political, civil and cultural areas.

In 1994, the Republic of Moldova ratified the Convention regarding the elimination of all forms of discrimination against women (CEDAW). Normative deeds, which contain particular specifications regarding support of gender equality, have been adopted:

- The National Plan for Promoting gender equality in society between 2003 and 2005, approved by the Government's Decision no 218 of 28.02.2003 (The Official Monitor of the Republic of Moldova, 2003, no 30-37, art 230);
- The National Plan of action concerning human rights which also includes women's rights, approved by the Parliament's Decision, no 415-XV of 24.10.2003 (The Official Monitor of The Republic of Moldova, 2003, no 235-238, art 950);

In May 2003, with the support of UNIFEM (United Nations Development Fund for Women), the project "Promoting equal rights and opportunities in Moldova by supporting legislation on gender equality and strengthening its implementation" was launched, and a large part of the national legislation was re-examined through it.

In 2003, the First Report and the Second Report, a governmental periodical for the national implementation of CEDAW, was created with the help of gender-related units from the central public administration authorities of specialty.

The institutional framework

An important step towards the implementation of the international recommendations and specifications and of the goals of The Action Platform of the International Women's Conference (Beijing 1995) was made by creating a national structure that would ensure turning into reality equal rights, liberties and equal possibilities, thus ensuring women's participation at the top management and decision making levels.

The Governmental Commission for Women's Problems, the Department for Equal Opportunities and Family Policies part of the Ministry of Work and Social Protection, the gender units part of Ministries and departments continue to function at national level. We must mention that the dialogue between state structures and NGOs has significant success.

Five centres for gender development were open at local level by the Ministry of Work and Social Protection with the support of the Swedish Government (SIDA) within the project "Gender, Leadership and Communication Network", between 2002 and 2003. The main objective is to spread and embed the conception of gender equality as well as to create equal opportunities for men and women at local level.

Targets for 2005-2015

Extend women's participation in social life by:

- *eliminating gender stereotypes* regarding the role and place of women in society and in the family;
- *fortifying the mechanisms* that ensure gender equality at all decision-making levels;
- *creating an institutional framework* for preventing and controlling gender-based violence.

This target's achievement is structured in time as it follows:

- *increasing the number of seats* held by women in Parliament;
- *increasing the number of female-leaders in top management* of public administration, economic or social organisations;
- *equality between women and men's wages.*

Barriers

The main obstacles in achieving the set target are:

- *women are not well represented at all decision-making levels.* Frequently, women's expression of political abilities is obstructed by traditionalist social tendency towards women's status, by lack of trust in own abilities, by burden of family responsibilities;
- *politicians and Government's gender awareness;* women's promotion in decision-making positions remains an important goal of the society's development towards democracy;
- *lack of special laws and deficiency of the institutional legislative framework* in ensuring gender equality;
- *statistical data referring to traffic of women* for exploitation and violence against them raise concern for society;
- *gender inequality in education, health, social assistance systems* and in some sectors of the national economy (services, trade, communications, light industry), which is reflected through women's employment in less important or low-salary jobs and men's employment in important and well-paid jobs;
- *the existence of normative papers which restrict women's right to education* in military and police forces;
- *lack of special laws* to prevent and stop domestic violence;
- *ambiguous attitude and inflexible set of mind,* which still prevail among some social groups regarding issues of women's promotion and empowerment.

Medium Term Activities between 2005 and 2006

The set of targets will be accomplished by taking the following actions:

- *elaborating, promoting and adopting the legislative framework, including:*
 - the legislative project regarding the assurance of equal chances for men and women;
 - the legislative project regarding prevention and stopping of domestic violence;
- *bringing up-to-date the goals established in the The National Plan for the Promotion of Gender Equality in the Society.*
- *developing a social environment encouraging women's empowerment by updating the legal framework, modernizing education curricula, training and supporting mass media that promote gender equality principles;*
- *developing and implementing a coherent cultural policy, which would eliminate actions cultivating gender conservatism and educate citizens to support gender partnership and mutual respect;*
- *reforming gender policies by promoting women to leadership positions, extending employment opportunities for women in the management of social institutions and economic enterprises;*
- *developing and implementing modern methodologies for collecting and processing statistical data to monitor progress in supporting gender equality and women's empowerment, especially the ratio of women's salaries compared to men's.*

Long Term Actions by 2015

The set of targets will be accomplished by taking the following actions:

- *developing the Promotion Strategy for Gender Equality;*
- *updating the goals established in the National Human Rights Action Plan during 2004-2008 for women's rights;*
- *creating a reliable information system for decision-makers and political party members in order to establish a constructive social dialogue, which would ensure successful reinforcement of the gender equality principle;*



Goal 4: Reduce Child Mortality

Targets	Indicators
<p>Target 5: Reducing the mortality rate of under-fives by two-thirds by 2015</p> <p>Reducing the mortality rate of under-fives from 18.3 (per 1,000 live new-borns) in 2002 to 15 in 2006, to 11.9 in 2010 and to 8.4 in 2015</p> <p>Reducing the infant mortality rate from 14.7 (per 1,000 live new-borns) in 2002 to 12.1 in 2006, to 9.6 in 2010 and to 6.3 in 2015</p> <p>Increasing the rate of children over 2 years vaccinated against measles from 99.2% in 2002 to 100% beginning with 2006</p>	<p>13. Mortality rate of under-fives</p> <p>14. Infant mortality rate</p> <p>15. Proportion of 2-year-olds immunised against measles</p>

Target 5: Reducing the Mortality Rate of Under-fives by Two-thirds by 2015

Situation Analysis

Analysing the evolution of infant mortality rate it appears that during 1990-2003 this indicator significantly fluctuated while in the last years it has reduced to 14.4 deaths per 1,000 live new-borns. Despite this decrease, the comparisons with the *Human Development Report for 2001* indicate that the child mortality issue is still critical.

During 1990-2003, the main causes of under-one mortality were complications during the prenatal period, followed by congenital anomalies, respiratory diseases, accidents and intoxication, contagious diseases and parasites. It should

be emphasized that in the last years the rate of congenital anomalies in infant mortality has exceeded the rate of deaths caused by prenatal illnesses. Child mortality caused by physical traumas and intoxication has also increased. This indicates an irresponsible attitude of some parents towards the health of their own children.

Depending on the area of residence, the child mortality rate in rural communities was higher than in urban areas until 1998. But after the administrative and territorial organisation structure changed, the situation reversed. The infant mortality rate in urban areas (15.1 deaths per 1,000 live new-borns in 2002) has increased compared to rural areas (14.4 deaths per 1,000 live new-borns).

The structure of child mortality by place of death

(cases of death at home in 2002 - 24%, in medical institutions - 74%, and in other places - 2%) shows that some parents are not taking proper care of their children, others have limited knowledge about the symptoms of illnesses, while the quality of medical assistance provided to needy families is low.

The evolution of the mortality rate of under-fives shows an alarming increase between 1993 and 1996, but then it decreased between 1999 and 2002. Given the implementation of several programmes on population's health improvement, the lowest value of this indicator was recorded in 2002 – 18.3 deaths per 1,000 live new-borns.

The structure of the mortality rate of under-fives shows that the major causes of death are accidents, intoxication, respiratory illnesses, anomalies and tumours. In the last years, the number of deaths caused by respiratory illnesses and anomalies has reduced, but the number of deaths caused by tumours has increased. Unfortunately, children are increasingly exposed to more risks: environment pollution, insufficient nutrition, insufficient hygiene, and parents' lack of knowledge about healthy lifestyle.

One of the key factors contributing to improving children's health is immunization. In our country, starting with 2001, almost all children (99.4%) have been immunized against measles, and therefore this target has been already achieved.

Long Term Targets by 2015

Reducing the mortality rate of under-fives by two-thirds by 2015. It is expected that the mortality rate of under-fives reduces to 15 deaths per 1,000 live new-borns by 2006, to 11.9 by 2010, and to 8.4 by 2015. This target includes reducing the infant mortality rate by two thirds before 2015.

The achievement of this target will be phased during the next years so that the infant mortality rate decreases to 12.1 by 2006, to 9.6 by 2010 and to 6.3 by 2015 (for 1,000 live new-borns).

Barriers

The main obstacles in achieving the set targets are:

- *insufficient funding of the healthcare system*, gaps in resource allocations for medical institutions in different locations (urban, rural, capital, province);
- *shortage of qualified medical staff*, especially in rural communities;
- *poor infrastructure* - bad roads, lack of accessible roads, and lack of ambulances equipped with adequate medical equipment, lack of modern communication means;
- *poor families' reduced access to quality medical services*, prevalence of informal payments for medical services, high prices of first necessity medicines;
- *ineffective control mechanisms over the quality of provided medical services*, improper promotion and performance-based remuneration mechanisms for medical staff;
- *high environment pollution*, insufficient nutrition, non-observance of hygiene rules;
- *low level of community training*, lack of knowledge about the requirements of a healthy lifestyle among parents, in particular within needy families.

Long Term Actions by 2005:

- *implementing national programmes* for assistance in reproductive health planning and protection, integral conduct of diseases, improvement of prenatal medical care and population immunization; reducing the number of births of under-weight babies and creating conditions for their survival;
- *creating conditions for prenatal care and assistance*; eliminating the risks during the first years of life;
- *developing and implementing the criteria and methodology for assessing risks* during pregnancy and at birth, for newborns and under-fives;

- *training and involving medical personnel in the implementation of new cost-effective technologies for child diseases prophylaxis and treatment;*
- *reinforcing institutional capacities in the healthcare sector by adapting the existing capacities to the demographic situation and to specific features of residence areas;*
- *developing and implementing social assistance procedures for young needy families, broadening the categories of quality medical services provided to these families;*
- *involving parents in training activities on prophylaxis and contraceptive methods, family planning, symptoms of diseases, and on child care and education.*



Goal 5: Improve Maternal Health

Targets	Indicators
<p>Target 6: Reducing the maternal mortality ratio by three quarters by 2015</p> <p>Reducing the maternal mortality ratio from 28 (per 100,000 live new-borns) in 2002 to 23 in 2006, to 21 in 2010 and to 13.3 in 2015</p> <p>Providing all maternity hospitals with qualified medical staff beginning with 2006 (nowadays the proportion is 99%)</p>	<p>16. Maternal mortality ratio</p> <p>17 Proportion of births attended by trained health personnel</p>

Target 6: Reducing the Maternal Mortality Ratio by Three Quarters by 2015

Situation Analysis

The level of maternal mortality reflects both the overall quality of the healthcare system and its orientation towards mother and child needs: access to specialised medical assistance, lower risks during pregnancy and birth, improvement of mother and child general health and, ultimately, improvement of women's social and economic status.

In the last decade, the maternal mortality ratio in the Republic of Moldova has been decreasing, but it's still higher than in other European countries. In 2002, the maternal mortality ratio illustrated 28 deaths per 100,000 live new-borns and this high level is prevailing due to complications during pregnancy and/or post-natal period. The decrease of maternal mortality ratio is conditioned by the implementation of the "National Programme for Improving Prenatal Medical Assistance in 1997-2002",

by the improvement of the family planning services, by greater responsibility taken by obstetrician-gynaecologists and women during pregnancy.

The relatively high level of maternal mortality in the Republic of Moldova is caused by a complex combination of social, economic and medical factors, the main ones being unemployment, inadequate working conditions for women, family violence, morbidity and abortions.

The inadequate practice of employing women for jobs with health-threatening conditions exposes mothers-to-be to major physical and psychological efforts, high temperatures or on the contrary, extremely low temperatures, improper concentration of chemicals, etc. Employment of many women, especially in rural areas, for occasional or seasonal jobs, deprives mothers-to-be of the social assistance ensured by the state: compensations and facilities for people working in harmful conditions, sick leave and maternity leave. Unfortunately, pregnant women in the Republic of Moldova are still working in tobacco fields, which seriously affect women's health.

Lack of transportation and communications, deterioration of medical institutions' equipment and resources and severe shortage of medical staff, especially in rural areas, have increased the number of midwives and family doctors supervising pregnancies.

High number of abortions is one of the medico-social problems acutely affecting maternal health. Thus, during 1995-2002, there were 0.8 abortions per one birth, and 50 pregnancy interruptions per 1,000 women of reproductive age. An alarmingly increasing number of abortions has been recorded among under-fifteens (0.15%) and among girls and women between 15 and 19 years (10%). This data emphasizes once again the need of modern family planning methods and of improving courses on health training.

Women's morbidity at reproductive age is a critical obstacle to improving maternal health. Of all people suffering from tuberculosis, 31.4% are women and 67.7% of these are at reproductive age. Unfortunately, 17.5% of people suffering from alcoholism are women.

Cancer related morbidity has been increasing, including reproductive organs cancer. Breast cancer is the first of cancer related mortality causes for women (19-25%).

An analysis of maternal mortality between 1990 and 2002 emphasizes the fact that 50% of all cases of maternal mortality could have been avoided, 43% could have been avoided under certain conditions and only in 7% of all cases death was inevitable due to severe, unpredictable and incurable complications. It was noted that 32% of the pregnancies resulting in death due to obstetrical risks had not been taken under observation, 35% of women had been taken under observation after the 14th week of pregnancy and 33% had been taken under observation on time.

Medical statistical data reveals that most women who died were from rural areas (58%), where medical services are of lower quality and the population is poorer.

Long Term Targets by 2015

Reducing the maternal mortality ratio by three-quarters by 2015. The achievement of this target

will be phased during the next years so that the maternal mortality ratio is reduced to 23 deaths per 100,000 live new-borns by 2006, to 21 by 2010, and to 13.3 by 2015.

Barriers

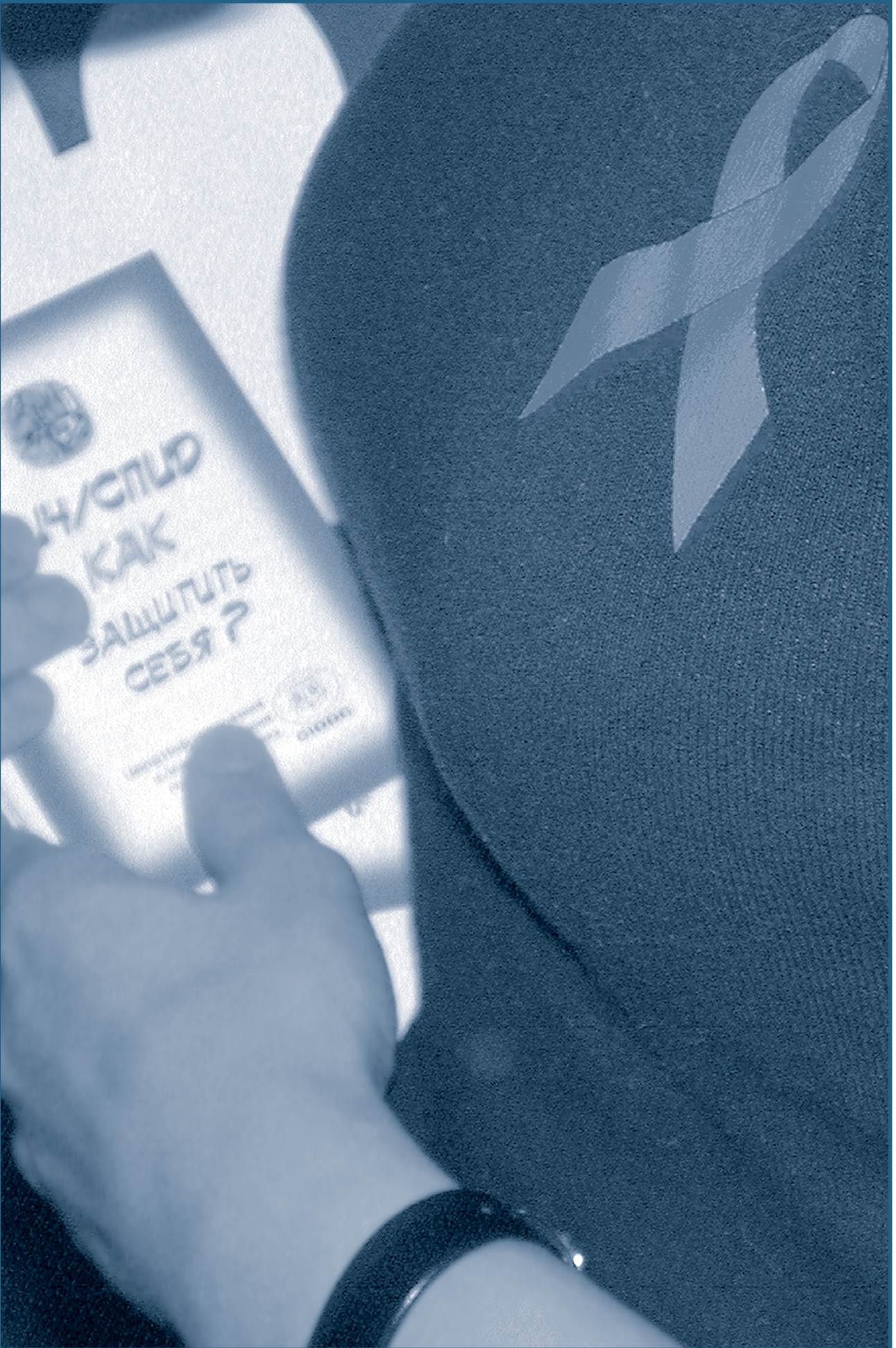
The main obstacles in achieving the set targets are:

- *reduced access for many women to quality specialised medical services*, especially in rural areas and for poor families;
- *inadequate supervision during pregnancy*, due to certain flaws in the healthcare system (uneven allocation of specialised medical services, inadequate financial management, shortage of highly qualified medical staff, insufficient modern medical equipment) as well as due to poverty, people's lack of responsibility and/or health awareness;
- *high ratio of abortions*, limited access for women from rural areas and poor families to family planning programmes;
- *inadequate general infrastructure* (transportation, communications and educational centres) and special medical infrastructure (specialised departments in medical institutions, equipment, qualified and well-motivated personnel, blood banks and medical information system);
- *deficient legal framework* related to working conditions and social assistance provided to pregnant women; employing women in tobacco related jobs.

Long Term Actions by 2015

- *regionalizing specialised medical assistance* by allocating funds for the rehabilitation and restructuring of maternity hospitals in all district centres and small towns;
- *urgent rehabilitation of the blood collection service* to cover maternity hospitals' demand of freshly frozen plasma and other blood products;
- *extending the capacity of hospitalisation of pregnant women in specialised centres throughout the country*, especially, in obstetrical pathologies departments, as planned, and in accordance to the reference criteria of maternity hospitals;

- *reducing the abortion rate* by disseminating information and expanding health awareness on modern contraceptive methods in mass media, and by preventing empirical abortions;
- *implementing the abortion methods recommended by the World Health Organisation;*
- *reducing the number of births outside specialised medical institutions* by developing infrastructure, more efficient use of community funds and by increasing health awareness among pregnant women;
- *implementing the audit concept in evaluating maternal mortality and life-threatening cases;*
- *improving medical management* in order to improve the efficiency of the activities related to improving maternal health: taking pregnant women under observation on time; coordinating the activity of family doctors and pregnancy specialists, increasing medical information exchange between family doctor centres and obstetrics hospitals;
- *improving the monitoring of the formal sector* in order to find, interdict and withdraw from work girls under the legal working age.



Goal 6: Combat HIV/AIDS, Tuberculosis and Malaria

Targets	Indicators
<p>Target 7: Preventing and decreasing the spread of HIV/AIDS by 2015</p> <p>Reducing HIV/AIDS cases from 4.66 (per 100,000 people) in 2002 to 4 in 2006, to 3.5 in 2010 and to 3.2 in 2015.</p> <p>Reducing HIV cases among 15 to 24-year-olds from 6 in 2002 to 4.9 in 2006, to 4.2 in 2010 and to 4 in 2015</p>	<p>18. HIV/AIDS incidence</p> <p>19. HIV incidence among 15 to 24-year-olds</p> <p>20. Contraceptive prevalence rate</p>
<p>Target 8: Preventing and decreasing the incidence of tuberculosis and malaria by 2015</p> <p>Reducing the mortality rate associated with tuberculosis from 15.8 (per 100,000 people) in 2002 to 12 in 2010 and to 7 in 2015</p>	<p>21. Prevalence and mortality rate associated with malaria</p> <p>22. Rate of population residing in malaria risk areas using <i>effective malaria prevention and treatment methods</i></p> <p>23. New cases of active tuberculosis</p> <p>24. Mortality rate associated with tuberculosis</p> <p>25. Rate of tuberculosis cases detected and treated under DOTS (Directly Observed Therapy)</p>

Target 7: Preventing and Decreasing the Spread of HIV/AIDS by 2015

Situation Analysis

The socially-determined diseases such as AIDS, tuberculosis and malaria, are among the top five diseases that have an impact on mortality, life expectancy and the quality of life. Fighting these diseases has become a major task for the entire society of the Republic of Moldova.

During 1987-1995, in the Republic of Moldova the HIV/AIDS infection was present in isolated, sporadic cases, identified among students from African countries, who were studying in Moldova. But starting with 1996, the epidemics of HIV/AIDS have become alarming. During 1987-2003, 1,794 people infected with HIV were identified in the Republic of Moldova, out of which 72% were men and 38% were women. Of all people infected with HIV, 80 were diagnosed with AIDS out of which 55 died.

The highest level of HIV/AIDS incidence was recorded in 1997 and 1998, 9.4 and respectively 9.5 cases per 100,000 inhabitants. It should be mentioned that in the past years the intensity of the epidemic process has stabilized. Thus, in 2001, 234 people were diagnosed with HIV, the incidence per 100,000 inhabitants was only 5.5 cases, and in 2003 there were 206 cases, the incidence being 4.7 per 100,000 inhabitants.

The epidemics have spread all over the country. In January 2003, the average prevalence indicator in the country, based on cumulative data, was 38.5 per 100,000 inhabitants. The most affected regions are the municipality of Balti with 430.7, the municipality of Chisinau with 68.7, the municipality of Tiraspol with 55.1 and Causeni town with 20. Statistical data from the left bank of the river Nistru (27.6 per 100,000 inhabitants) does not reflect the real epidemic situation since investigations of blood samples using the *Western-Blot* test have not been undertaken during the last 4 years in Transnistria.

The HIV/AIDS spreads mainly among intravenous drug users, even though their rate was decreasing from 84% in 2000 to 70% of all cases in 2002. HIV/AIDS affects primarily young people. The rate of 15 to 19-year-olds is 13% of all infected people, and people between 20 and 24 years old represent 32%. Unfortunately, there are cases of HIV/AIDS among children between 0-14 years old. Their rate is 0.49% of the total number of infected people.

Furthermore, the rate of women infected with HIV/AIDS increased from 24% in 2000 to 31% of the total number of cases in 2002. The risk of infection for women of reproductive age has been increasing, as well as the risk of transmitting the disease from mother to child. 56 HIV positive pregnant women were detected in the Republic of Moldova. To prevent the spreading of HIV/AIDS infection, the Moldovan authorities in cooperation with the international organisations have taken a series of actions, including the formulation and implementation of a Law on AIDS Prophylaxis, the implementation of national programmes on AIDS and on sexually transmitted infections prophylaxis and prevention, including a number of projects funded by the World Bank, United Nations specialised agencies, the Global Fund for AIDS, Tuberculosis and Malaria, the Soros Foundation, etc.

Long Term Targets by 2015

Preventing and decreasing the spread of HIV/AIDS by 2015. The achievement of this target will be phased during the next years so the incidence of HIV/AIDS is reduced to 4 cases per 100,000 inhabitants until 2006, to 3.5 cases in 2010 and to 3.2 cases in 2015.

It is also stipulated that the HIV incidence among 15 to 24-year-olds will decrease from 6 in 2002 to 4.9 in 2006, to 4.2 in 2010 and to 4 in 2015.

Barriers

The main obstacles in achieving the set targets are:

- *expansion of drugs use*, especially of the intravenous ones;
- *limited capacities of medical institutions* to identify HIV/AIDS infection, limited funding of the respective services;
- *limited access of people affected by HIV/AIDS* to modern counselling and testing services;
- *limited HIV/AIDS awareness among people*, in particular among those belonging to high-risk groups; inefficient traditional methods for the education and promotion of a healthy lifestyle.

Long Term Priority Actions by 2015

- *training population*, in particular youth and high-risk groups (drug users, sex workers, sexual minorities, prisoners, trafficked women) in HIV/AIDS prevention;
- *reducing intravenous drug use* by improving the activities of all state institutions responsible for fighting drug use and by strengthening their cooperation with the civil society;
- *implementing HIV/AIDS prophylaxis programmes*, in particular those focusing on reduction of noxiousness among intravenous drug users, including those in prisons;
- *reducing the number of HIV infections among children* by preventing mother to child transmission (maternal and foetus prophylaxis);
- *ensuring safe blood transfusions, medical intervention and care* by adequately equipping medical institutions, motivating personnel and improving management;
- *ensuring quality medical assistance* and social support to people infected with HIV/AIDS and

to members of their families by broadening specialised services and allocating adequate funds;

- *the state will ensure unconditional and complete antiretroviral treatment* for all people infected with HIV/AIDS;
- *extending the capacities of epidemiological surveillance services* and of the institutions ensuring monitoring of HIV/AIDS and sexually transmitted infections;
- *increasing awareness and improving medical personnel's practical skills* in preventing HIV/AIDS through modernizing training programmes, organising development courses, internships for specialised medical staff in specialised medical institutions.

Target 8: Preventing and Decreasing the Incidence of Tuberculosis and Malaria by 2015

Tuberculosis

The epidemic situation of tuberculosis in the Republic of Moldova deteriorated during 1990-2002. Thus, total morbidity rate caused by tuberculosis almost doubled amounting to 83.6 per 100,000 inhabitants in 2002 compared to 39.2 per 100,000 inhabitants in 1990.

During the same period the rate of mortality caused by tuberculosis increased by 3.7 times amounting to 15.8 per 100,000 inhabitants in 2002 compared to 4.6 per 100,000 inhabitants in 1990. The highest value of this rate was recorded in 2000 with 16.9 per 100,000 inhabitants. In 2001 the prevalence of tuberculosis was 148.1 per 100,000 inhabitants.

The degradation of the epidemic situation of tuberculosis in our country has been caused by many factors among which poverty, deterioration of the healthcare system, insufficient funding (the existing funds covering only 15% of the needs of the national tuberculosis control programmes), use of obsolete methods in diagnosis and treatment.

The situation is particularly alarming in prisons, where the incidence of new cases of tuberculosis increased to 93.4% in 2001 compared to 2000,

and it was 32 times higher than the average in the country. Inappropriate detention conditions, acute lack of anti-tuberculosis medicines, malnutrition, and limited level of education of detainees had transformed the prisons at the end of the nineties into hotbeds of infection, which were a real epidemic danger for the entire Moldovan population.

To improve the situation, the authorities of the Republic of Moldova followed the recommendations of the World Health Organisation, and have adopted a new National Programme for Tuberculosis Control for 2001-2005 based on the strategy of DOTS (Directly Observed Therapy). The goals of the National Programme are to control and prevent the tuberculosis epidemic, reduce the spread of the infection and prevent the appearance of refractory and multi-refractory forms of infection.

The National Programme was launched at the end of 2001 in the municipality of Chisinau, in the former Lapusna and Orhei counties, and then replicated throughout the country. At the beginning of 2003, 88% of the Moldovan population had access to specialised medical assistance based on DOTS and 51% of the identified new cases and relapses were treated in accordance to the recommendations of the World Health Organisation.

The efforts of the authorities and of a few civil society organisations, as well as continuous assistance of international organisations allowed a certain stability of the epidemic situation of tuberculosis both in the country and in prisons. Thus, the growth rate of the main indicators considerably decreased; the global incidence of tuberculosis in prisons decreased by 16.5% in 2002 compared to 2001.

Long Term Targets by 2015

Preventing and decreasing the incidence of tuberculosis and malaria by 2015. The achievement of this target will be phased during the next years aiming to reduce the mortality rate due to tuberculosis to 13.9 cases per 100,000 inhabitants by 2006, to 12 by 2010 and to 7 by 2015.

It is estimated that in 2006 the number of cases identified and treated within the DOTS Programme will reach 100%.

Since the positive impact of the actions taken to control tuberculosis will not have immediate results, the morbidity associated with tuberculosis (new cases and relapses) will continue to increase until 2007, major decrease trends are expected only after 2008. New active tuberculosis cases will be reduced to 97.8 cases per 100,000 people until 2015.

Barriers

- *low living standards for most people*, especially in rural areas and small towns, high rate of families with reduced subsistence resources;
- *lack of funds* for the national tuberculosis control programmes, deterioration of technical and material resources of surveillance institutions, tuberculosis prophylaxis and treatment;
- *degrading conditions in prisons*, acute malnutrition of inmates, lack of anti-tuberculosis medicines;
- *lack of awareness* on preventing and treating tuberculosis among the Moldovans, especially within needy families.

Long Term Priority Actions by 2015

- *reinforcing the capacities of primary medical institutions* to provide medical assistance to patients suffering from tuberculosis;
- *training medical personnel* to provide assistance to tuberculosis patients in line with the requirements of the DOTS Programme;
- *reinforcing the procedure of detecting and recording* cases of progressive tuberculosis;
- *creating Phlegm Microscopic Research Centres* and equipping them with modern equipment and necessary consumables;
- *identifying financial resources necessary* to modernize specialised medical centres for combating tuberculosis and supplying them with anti-tuberculosis medicines according to their needs.

Malaria

According to WHO's assessment, due to its geographic location and climatic conditions, the Republic of Moldova is situated in a high-risk zone for malaria development. The main factors determining the risk of large-scale re-appearance of this disease are:

- the high number of days, an average of 154, with temperatures above 15 Celsius Degrees, which facilitate development and maturation of *Haemamoeba* in mosquitoes' bodies;
- existence of a large number of mosquitoes during these periods (300-500 specimen, and in some areas up to 600-900 per 1 m², in observation spots);
- long period, up to 5 months, favourable to malaria transmission;
- low immunity of the population;
- migration of the population, facilitating imports of tertiary malaria, which may spread in the climatic conditions of the Republic of Moldova.

Given the implementation of a complex system of preventing and fighting the disease, malaria was eradicated as a widespread disease in 1953 and as an indigenous disease in 1959.

In 1971-2001 Moldova recorded 665 cases of malaria, including 647 imported cases (97.3%) and 18 indigenous ones (two infested by mosquitoes and 16 through blood transfusions). In 2002, 29 cases of malaria were recorded, representing 0.68 per 100,000 inhabitants.

In spite of the fact that Moldova is a high-risk zone, there are many disadvantages in preventing and controlling malaria:

- due to the lack of funds for sanitary institutions, the number of people tested for malaria through laboratory methods following clinical and epidemiological indications decreased from 4,231 in 1990 to 1,662 in 2002;
- continuous lack of specific medicines influences clinical results negatively; it maintains risks of complications, survival of the virus and relapse of the illness;
- the opening of state borders has not been accompanied by the implementation of an efficient system of epidemiological surveillance of malaria;
- fewer procedures to eliminate malaria-facilitating vectors at the stage of larva and indigo.

To avoid the risk of re-occurrence and spread of malaria, Moldovan authorities, in cooperation with the European Regional Office of the World Health Organisation, have implemented the Roll Back Malaria Programme which will eradicate indigenous malaria by 2006. A unified epidemiological malaria surveillance system will be created at all levels of curative and preventive medicine, to widespread dissemination of sanitary and hygiene knowledge and information on malaria prophylaxis, to obtain public administration and people's support in performing anti-malaria actions on-site.



Goal 7: Ensure Environmental Sustainability

Targets	Indicators
<p>Target 9: Integrating the principles of sustainable development into the country's policies and programmes and minimising the loss of environmental resources</p> <p>Increasing the rate of forested land from 10.3% in 2002 to 11% in 2006, to 12.1% in 2010 and to 13.2% in 2015</p> <p>Increasing the rate of protected natural areas for the conservation of biological diversity from 1.96% in 2002 to 2.1% in 2006, to 2.2% in 2010 and to 2.4 in 2015</p>	<p>26. Proportion of forested land</p> <p>27. Protected areas to maintain biological diversity</p> <p>28. GDP per unit of conventional fuel consumption at current prices</p> <p>29. Carbon dioxide emissions from fixed and mobile sources, kg/per capita: chlorofluorocarbon which damages the ozone layer and CO₂ gases that lead to global warming</p>
<p>Target 10: Halving the proportion of people without permanent access to safe water by 2015</p> <p>Increasing the rate of the population with permanent access to safe water from 38.5% in 2002, to 47.4% in 2006, to 57% in 2010 and to 68.5% in 2015</p>	<p>30. Proportion of population with permanent access to safe water</p>
<p>Target 11: Halving the number of people without access to improved sanitation by 2005</p>	<p>31. Proportion of people with access to improved sanitation</p>

Target 9: Integrating the Principles of Sustainable Development into the Country's Policies and Programmes and Minimising the Loss of Environmental Resources

Current Situation

Ensuring people a favourable living environment,

improving and protecting the environment and maintaining the biological equilibrium in correlation with the economic interests of the society are fundamental state functions. Their accomplishment is based on the society's interaction with the environment and has three dimensions: use of natural resources, protection of the environment, and insuring ecological security.

Sustainable development implies rational use of

natural and energetic resources, of environment's qualities in order to achieve economic, ecological, and recreational interests of today's generation without undermining the needs of future generations. This is the main function of the state. The essence of implementing the principles of sustainable development in our country can be expressed through a close link between the economic, social and ecological aspects of the development.

The foundation of the environmental policy during the transition period was set by the Law on Environment Protection (1993), the Strategy on Environment Protection in the Republic of Moldova, the National Programme of Strategic Actions for the Protection of the Environment (1995), the National Action Plan for Environment Protection (1996), the National Action Plan for Health Related Issues (2001) and the Republic of Moldova's Strategy on Environment Policies (2001). Furthermore, there were created strategic documents containing a series of stipulations regarding environment protection. Generally, about 30 bills were passed, and 50 regulations and instructions were implemented. Altogether they form the normative framework on environment. Until now 18 international conventions and documents on environment have been signed and ratified, their accomplishment has become a component of the environment activities at national and regional level.

Forested Land. Today's forests cover 349.5 thousand hectares, which represent 10.3% of the country's territory. Moldova's forests protect the environment. The main function of the country's forests at present and in the future is to maintain the ecological equilibrium. But the rate of forested land is not enough to fulfil this function effectively. Together with other natural and anthropogenic factors, deforestation causes a high level of soil erosion, land slides, degradation of aquatic resources, and it intensifies draughts. Authorised cut-offs as well as illegal cut-offs in the forested area of the country reduced the area of forested land in the past ten years. It should be emphasized that the eco-protective effects of the forest are constant only if at least 15% of the country's territory is covered by forests.

Conservation of Biological Diversity. Protection of natural eco-systems plays an

important role in sustainable development. Eco-systems cover 20% of the territory of Moldova. Unfortunately, natural eco-systems in Moldova are fragmented and mostly deteriorated. Flora consists of 6,720 species, out of which 27.3% are vascular plants. Fauna consists of 15,262 species, out of which 3% are vertebrates.

The state-protected land area represents 1.96% of the country, i.e. 66,467.3 ha. This number is inferior to other European states (Ukraine 3%, France 7%, Germany 13%, Austria 25% etc.), and it is not enough to maintain ecological equilibrium and protect biological diversity, but it can serve as a starting point in creating a National Ecological Network of protected areas. At present, the Network comprises 12 categories out of which 5 are essential scientific reservations, 63 are natural reservations and 41 are landscape reservations.

Moldova is a unique country due to its geographical position, climate, geological conditions, relief and soil composition. In addition Moldova is often hit by natural disasters such as floods, torrential rains, hail, strong winds, land slides, draughts, frosts and earthquakes.

The high percentage of the population lives from exploiting the soil, which is a natural resource. At present, the value of agricultural lands is decreasing. A major danger comes from soil erosion. The surface of eroded land increases each year by 0.9%, which means that farming lands lose 26 million tones of fertile soil annually.

Air Quality. The quality of atmospheric air depends on the amount of harmful substances let off by various stationary and mobile sources: industrial plants, transportation, power plants, public utilities and individual facilities, etc. Air pollution is a problem especially for the large cities of the country. The main sources causing air pollution are vehicles, CTE and boiler shops. The annual average concentration of nitrogen oxide in Chisinau, Balti and Tiraspol overpasses the maximum accepted concentration by 1.5 times, while sulphur oxides in Bender are 1.7 times more than the accepted limit.

Currently, the main sources of polluting the air are vehicles. Thus, the rate of harm emissions is 80% of the total gas emissions coming from all sources

of air pollution. Some car owners still use ethyl gasoline with high concentration of lead, and not all gas stations have substituted ethyl gasoline with non-ethyl gasoline. This problem is aggravated by huge imports of relatively old vehicles, which are not equipped with devices for neutralising gas emissions.

Target 10: Halving the Proportion of People Without Permanent Access to Safe Water by 2015

Water Sources. At present, more than 50% of the population consumes water which does not fulfil the sanitary norms. This is mainly the result of the exhaustion and degradation of quality aquatic resources, of the lack and of the poor condition of systems and technology used in treating water. About 81% of the urban population and 17% of the rural population benefit from centralized systems of water supply. 67% of rural establishments' aqueducts are not hygienic and are in poor conditions. Mayoralties and collective associations, who manage the centralized systems of water supply, do not have the necessary material resources and qualified staff. On the other hand, many citizens, due to low income, are not able to pay the cost of these services.

The other people drink water from wells and springs. More than 80% of the wells and 50% of the springs do not contain safe water. The purification installations of residual waters in rural areas do not function due to various reasons, including the cut of electricity supply, damaged and stolen equipment.

Target 11: Halving the Number of People Without Access to Improved Sanitation by 2005

Waste Management. Collection, accumulation, storage and processing of waste are other serious problems for the Republic of Moldova. Currently, over 30 million tons of waste is accumulated in the country, including over 6 million tons of industrial waste accumulated as a result of construction materials, food and households. The platforms for waste accumulation (total area of about 1,000 ha) cannot guarantee ecological safety. These

platforms generally do not exist in most rural areas and small towns. In such conditions, a considerable percentage of the population and of traders illegally leave household and industrial waste in improper places (on the side of roads, rivers, slopes etc.). The accumulated waste is practically never evacuated. Toxic substances and waste represent a major danger for the environment, including pesticides that are part of the persistent organic polluting substances. Their quantity reaches 1,712 tones in 340 warehouses out of which 80% are in unsatisfactory conditions.

Long Term Targets by 2015

- Integrating the principles of sustainable development into the country's policies and programmes and decreasing the loss of environmental resources, dealing with them gradually:
 - the rate of forested areas will increase from 10.3% in 2002, to 11% in 2006, from 12.1% in 2010 to 13.2% in 2015 (according to the Strategy for Sustainable Development on the Forest Sector);
 - the rate of natural eco-system areas protected for biodiversity conservation will increase from 1.96% in 2002 to 2.1% in 2006, from 2.2% in 2010 to 2.4 % in 2015. (according to the National Strategy and to the Action Plan for Preserving Biological Diversity).
- Halving the rate of people without permanent access to safe water by 2015;
 - the percentage of population with permanent access to safe water will reach 47.7% in 2006, 57% in 2010, and 68.5% in 2015.

It's worth mentioning that the target value of the indicator for 2006 is set forth by the Water Supply and Sewage Programme for Moldovan communities. The Programme includes 43 localities (municipalities and towns) with a total population of about 1.5 million people and 77 rural communities with a total population of almost 237,000 inhabitants.

Significant increase of the rate of people who have access to improved sanitation. It is planned that the rate of population with access to improved sanitation will increase from 40% in 2001 to 56% in 2006 and from 73% in 2010 to 90% in 2015.

Barriers

- *insufficient forest resources* to fully meet the economic, social and ecological needs of the country;
 - *dispersed and fragmented forest resources*, uneven distribution throughout the country;
 - *forest resources' low biologic stability and resistance to harmful factors*; degradation of the genetic heritage of spontaneous biota;
 - *lack of capacity and sometimes unwillingness* of local authorities to fight illegal cut-offs and grazing, which leads to the destruction of forest and forest belts which are under the management of Town Halls;
 - *division and degradation of natural eco-systems* for preserving biodiversity;
 - *obsolete technologies used by several industrial, power and heating plants*, great number of vehicles with high degree of pollution;
 - *insufficient current capacities of water sources*, inefficient use of available resources;
 - *high wear of technical equipment*, water distribution pipes and sewage systems, obsolete residual water cleaning technologies;
 - *population's low level of incomes*, legislative nihilism, inefficient environment protection actions.
- *extending forested areas* and increasing the efficiency of guarding and protection services;
 - *extending land areas*, conservation, rehabilitation, reconstruction and rational use of biological and landscape resources;
 - *implementing European standards in air quality and level of emissions*, implementing technological ecological processes on a larger scale;
 - *improving administrative, economic and financial mechanisms* for environment protection and sustainable management of natural resources;
 - *population's training and education in ecology issues* by extending and modernizing training courses taught in educational institutions at all levels; promoting the principles of sustainable development in mass media;
 - *extending and diversifying the forms of cooperation with civil society organisations*, broader involvement of citizens in the decision-making and implementation processes related to natural resources management and environment protection.

Long Term Priority Actions by 2015

- *preventing pollution and protecting water sources*, harmonizing the legislative framework and the water standards with the EU environment legislation;
- *improving the system of industrial and household waste management*; reducing the amount of toxic substances and waste stored in unauthorized places;

Goal 8: Create a Global Partnership for Development

Targets	Indicators
<p>Target 12: Further developing an open, rule-based, predictable, non-discriminating trading and financial system through promoting exports and attracting foreign investments</p>	<p>32. Exports with high added value, million USD 33. Import of cars, machines and equipments, million USD 34. Proportion of international commercial transactions based on free exchange agreements, total of transactions 35. Rate of commercial balance deficit in GDP 36. Rate of foreign companies operating in the country 37. Foreign Direct Investments (FDI), USD per capita 38. Turnover of “de novo” companies with foreign capital 39. Proportion of Official Direct Assistance for basic social services (basic education, primary health care, nutrition, safe water and sanitation)</p>
<p>Target 13: Addressing the needs of the Republic of Moldova as a landlocked country through modernizing the transport and customs’ infrastructure</p>	<p>40. Transport capacity of the international road traffic 41. The investment rate in transportation total investments 42. The investment rate in the development of air and naval transport, total of investments 43. Traffic capacity of border customs 44. Rate of Official Assistance for Development (OAD)</p>
<p>Target 14: Restructuring and managing the external debt problem</p>	<p>45. Public external debt, % of GDP 46. Public external debt service, % of budget income</p>
<p>Target 15: Developing and implementing youth strategies</p>	<p>47. Unemployment rate of 15 to 24-year-olds</p>
<p>Target 16: Providing access to affordable, essential medicines in cooperation with pharmaceutical companies</p>	<p>48. Proportion of population with access to affordable essential medicines on a permanent basis</p>
<p>Target 17: Building up an informational society</p>	<p>49. Telephone lines and mobile subscribers per 100 inhabitants 50. Personal computers in use per 100 inhabitants 51. Internet users per 100 inhabitants</p>

Target 12: Further Developing an Open, Rule-based, Predictable, Non-discriminating Trading and Financial System Through Promoting Exports and Attracting Foreign Investments

Although the trade system of the Republic of Moldova is liberalized, studies show that a number of internal barriers, which impede exports, still exist. Given that the Republic of Moldova cannot rely on its own energy resources, imports consist mainly of minerals while investment goods such as vehicles, machines and equipment are weakly represented.

This target will be achieved by doubling the import of vehicles, machines and equipment (reaching the annual import level of 550-570 million USD, reaching a positive payment balance deficit and achieving a FDI flow worth at least 1,000 dollars USD per capita).

Barriers

- *persistence of certain administrative barriers for exports;*
- *lack of a modern system of wholesale trade and lack of local goods distribution.*

Long Term Actions by 2015

- *liberalization of the trading system by eliminating all formal and informal internal barriers;*
- *attracting foreign investments by further privatising of assets and encouraging start-up businesses;*
- *changing the regulation framework by encouraging foreign and local investments in different areas of the national economy;*
- *implementing the Revigoration Strategy of the wholesale trade and creating a modern network for wholesale trade based on attracting investments in the construction, reconstruction, and equipment of the wholesale network with the necessary equipment;*
- *preparing the National Programme for Substituting Imports with the purpose of increasing the attractivity competitiveness of local goods and satisfying the existing internal demand through indigenous goods.*

Target 13: Addressing the Needs of the Republic of Moldova as a Landlocked Country Through Modernizing the Transport and Customs Infrastructure

Although it has access to a very small portion of the Danube's coast, the Republic of Moldova is considered a landlocked country with relatively limited opportunities for international commercial development. This issue will be partially solved upon completion of the construction of the harbour in Giurgiulești. Since a considerable increase of the external trade volume is expected, the capacities of the future terminal might be insufficient. Therefore, it is important to further develop the terrestrial and air transport infrastructure, improve the international roads and railways and increase the traffic capacities of the customs system. Considering these aspects the Republic of Moldova sets the following target:

- addressing the needs of the Republic of Moldova as a landlocked country through modernizing the transport and customs infrastructure. This target will be monitored using the following indicators:
 - transport capacity of the international road traffic will reach 10,000 transport units per day;
 - investment rate in the transport sector will reach 20% of total investments;
 - investment rate in the development of the air and naval transport will reach 35% of the total investments;
 - traffic capacity of border customs will reach 1,000 transport units per day for each customs point.

Barriers

- *disproportionate structure of the transport system, wherein 86% of total operations relate to road transport, 12% to railway transport and only 2% to air and naval transport;*
- *low quality and limited capacity of the terrestrial and air transport infrastructure;*
- *lack of annual budget allocations for maintenance and modernization of transport infrastructure;*

- *unsolved conflict* in the Eastern part of the country which determines a number of transporters coming from East or West of the country to avoid the territory of the Republic of Moldova altogether.

Long Term Actions by 2005

- *increasing* the speed of railway transport;
- *renovating* the railway segment Răvaca-Căinari;
- *developing capacities* and electric power connections on the railway segment Razdelnaia-Ungheni;
- *modernizing* Poltava road;
- *finalizing* the construction of the terminal in Giurgiulești;
- *building an airport* for goods for high-capacity airplanes;
- *reducing the number of, and simplifying customs procedures* for authorizing international commercial transactions.

Target 14: Restructuring and Managing the External Debt Problem

The problem of external debt emerged in Moldova in the 1990s and worsened after the regional financial crisis between 1998 and 1999. At the beginning of the transition process, in 1991, the Republic of Moldova did not have external debts but towards the end of 2003, the volume of external debt, including those for energy resources, reached 1,440.1 mil USD, the external debt, administered by the Government being of 751,4 mil USD, which represents 36,7% of GDP.

For 2004-2007 the state debt rate of GDP is expected to continue its gradual decrease from 37.3% in 2004 to 34 in 2007. At the end of 2003, the external state debt was 77.3% of total state debt.

The target of restructuring and managing the external debt problem has been proposed in order to diminish the negative outcomes caused by external debt.

Barriers

- *Inadequate structure* of the Moldovan economy;
- *Low rate of foreign businesses* in the Republic of Moldova;
- *Insufficient geographic and product diversification* of exports.

Long Term Actions by 2015

- *extending cooperation* with the International Monetary Fund and with other bilateral creditors, which will allow a restructuring or even annulment of an important amount of the external public debt;
- *ensuring an inflow of FDI*.

Target 15: Developing and Implementing Youth Strategies

Youth Situation Analysis

The social transformation of the 90s offered more opportunities to young people, who, due to their age and creative potential have more opportunities to benefit from the advantages of an authentic democracy, of a market economy based on free initiative and of the European direction of our country. Currently, young people form the most numerous social category, people aged between 15 and 29 years represent almost a quarter of the country's population. This places the Republic of Moldova among the countries with the youngest population in Europe and the achievement of the youth's full potential is a key goal at the beginning of this millennium.

The reform of the education system and the strengthening of technical and material resources of educational establishments, especially of universities, have opened new opportunities for youths. The number of students attending higher education reached 110,000 in 2003, an increase of 1.4 times compared to 1993. The extension of high schools network and the reorganisation of specialised educational institutions offer young people, especially those from rural areas, access to general and vocational high quality education.



The hardships of the transition period have affected the youth dramatically. They faced and are still facing numerous problems, such as unemployment, illegal emigration, trafficking of human beings, juvenile delinquency and marginalization of certain groups of young people.

Economic opportunities are not equally accessible to all young people in different areas of the country. The youth in rural areas and small towns is more affected while young people with disabilities are even more affected. The lack of professional and economic opportunities determines many young people to leave the country. As a consequence, the traffic of human beings has reached alarming proliferation and the number of youths involved in criminal activities has increased. The number of young people looking for a job in 2003 was 28.4 thousand, i.e. 46% of all people registered at the National Agency for Workforce Occupation. According to the data of the Work Force Report, the unemployment rate among young people aged between 15 and 29 was 2 times bigger than the unemployment rate recorded among the entire active population in 2002. The same ratio was kept throughout 2003.

The vulnerability of young people towards the difficulties of the transition period is revealed not only by the high unemployment rate, but also by other reprehensible phenomena, such as increased drugs use, spreading of sexually transmitted infections and HIV/AIDS, and the cult of violence.

Trafficking of human beings remains an acute problem for the Republic of Moldova. The victims of human trafficking are mostly girls and young women. Thus, statistical data reveals that almost half of the trafficked victims are under 18, and the rest were 18 to 24-year-olds.

To solve the problems inherited from the totalitarian past as well as the new ones specific to the transition period, the Parliament of the Republic of Moldova adopted a Law on Youth in 1999, and the Government adopted the *Strategy for Youth* in 2003. These documents set forth the main guidelines for youth policies and identified priorities for this social category:

- creating jobs for young people;
- consolidating human and institutional abilities

in assisting the youth and raising the level of training for young people;

- facilitating youth's access to information services aimed at creating a favourable environment for their development;
- increasing youth's participation in social life.

Medium Term Goals for 2005-2006

- increasing job opportunities for young people;
- increasing access to education and public health services as well as to services regarding a healthy lifestyle and their continuous development;
- developing human and institutional abilities to work with young people;
- encouraging youth's participation to the decision making process in the social, economic, cultural and political development areas by creating local youth councils and other forms of participation;
- facilitate access to information, services and free quality time;
- creating youth centres all over the country.

Long Term Goals by 2015

- consolidating human and institutional abilities in assisting the youth and improving youth awareness;
- cultivating youths' patriotism and respect for the national values.

Targets

- elaborating and implementing youth strategies by updating and implementing the Youth Strategy;
- integrating the respective policies within the strategies, programmes and action plans in other sectors such as employment, education, health care etc.

It is expected that

- youth unemployment rate will decrease from 18.1 in 2003 to 11 by 2006, to 9 by 2010 and to 5 by 2015;
- the rate of youth finding permanent jobs will increase by 20% annually; a network of friendly

services for the youth will be created;

- the rate of young people diagnosed with socially-determined diseases will decrease by 10%.

Barriers

- *lack of institutional capacities* for the promotion of youth policies, insufficient material and financial resources;
- *deficient legal framework*;
- *unstable business environment and young people's scepticism*;
- *high level of internal and external migration*, caused by lack of jobs and self-assertion opportunities for the youth, especially in rural areas and small towns;
- *insufficient use of advanced technologies* which impedes the increase of jobs that could be attractive to young people;
- *inefficient actions taken to find jobs* for graduates;
- *insufficient information for youth* on employment opportunities.

Long Term Actions by 2015

- *ensuring youth's access to public services of high quality*, such as education, professional training, extra-curricular programmes, healthcare, rapid and accurate information and counselling in related issues;
- *allocating sufficient financial resources* for the full implementation of youth policies; involving the entire society in identifying and solving youth problems;
- *developing and implementing tools for monitoring*, analysing and forecasting youth status both in rural and urban localities, strengthening institutional capacities for the development and implementation of youth public policies;
- *ensuring equal opportunities for all young people*, especially for those with limited opportunities: youth from small rural communities, orphans, people with special education needs, from poor or single parent families, disabled youths;
- *implementing* the European Charter on Youth's Participation to Local and Regional Community Activities;

- *signing, ratifying and implementing* the Convention of the European Council on Transnational Volunteer Services;
- *social integration of youth with deviant behaviour*: young homeless people, people in prisons, youth involved in criminal activities;
- *extending cooperation with the civil society organisations*, encouraging social dialogue and partnership, eliminating inter-department barriers in implementing youth policies.

Basic Principles

- **ensuring non-discrimination**: every young person has equal rights, regardless of race, colour, sex, age, religion, ethnic origin, social origin, wealth, family, residence or any other characteristics;
- **ensuring equal opportunities**: each youth has the opportunity to develop his/her entire potential as a human being and citizen;
- **respecting young people as citizens**: each young man is a citizen with full rights, having the same rights and obligations like any other social group, including the right of freedom of expression, opinion and assembly;
- **encouraging youth's participation**: youths will be assisted in exercising their rights in order to fully participate to social life.

Youths will have the possibility to freely express their opinions on their problems, either directly or with the help of a representative authority, as well as to participate in the creation of youth policies. The Government will accomplish this by consolidating social partnerships with civil society and especially with youth organisations, encouraging dialogue on youth problems, consolidating European and international cooperation regarding youth and related areas, creating an adequate legislative framework based on European practices.

Target 16: Providing Access to Affordable, Essential Medicines in Cooperation with Pharmaceutical Companies

To implement the State Policy on Medicines for 2003-2005 supported by the World Health Organisation, the Republic of Moldova launched the process of systematic research on the medicines market, including analysis for nomenclature and price as well as for population's physical and economical access to medicines.

The results of the above-mentioned studies reveal that average prices for medicines in Moldova are lower compared to other countries in the region, i.e. the average cost of a pill-box is 0.56 USD. This is mostly due to the state's restriction on commercial tax (not more than 40%).

According to national classifications, about 41.4% of the registered medicines in the Republic of Moldova are considered low-cost while the other 44.3% have an average price. Therefore, about 85.7% of available medicines on the Moldovan market are relatively low-cost and affordable for the population. We would like to stress that during 2002-2003 the population's access to medicines improved and now it represents 2.2% of the average annual salary per one illness.

Long term targets by 2015

Ensuring access to essential medicines at a reasonable price in cooperation with pharmaceutical companies, by fully implementing the International Health Organisation Medicines Strategy on 2004-2007. This will be done by:

- ensuring increased access to first necessity medicines for priority health issues, especially for the poor;
- promoting access to medicines through international trade agreements and by taking advantage of the opportunities created by the TRIPS Agreement of the International Trade Organisation;
- implementing the standardized indicators by measuring equitable access to first necessity medicines.

Target 17: Building up an Informational Society

According to the Declaration of Intention signed in Ljubljana in 2002 by the member-states of the Stability Pact in South-Eastern Europe, the Republic of Moldova committed itself to building up an informational society aimed at meeting citizens' interests based on the principles stipulated by the UN Charter, the Universal Declaration of Human Rights and the Charter on Building World Information Society in Okinawa 2000.

In the past years, building up an informational society in the Republic of Moldova has been demonstrated by an increasing number of fixed and mobile telephone lines facilitated by the instalment of main optic fibre lines in all districts, by international safe optic fibre and satellite connections and by an increasing number of personal computers and Internet users. A rapid development of communications has been recorded in the area of mobile phone connections. The annual increase of the number of subscribers has reached about 137.6 thousand people with networks covering approximately 66% of the country.

However, there are many obstacles in building up an information society. The rate of diffusion of fixed telephone lines in our country is one of the lowest in Europe, about 21.9 per 100 inhabitants at the end of 2003. About 50% of households do not have telephone connection. The density of lines per 100 inhabitants is 3 times smaller in rural areas than in urban areas. The rate of analogue connections is still high. This does not allow provision of quality services and limits the increase of Internet users.

Although the number of personal computers has rapidly increased over the last years as well as the number of Internet users, the diffusion rate of these services is still very low.

Being aware of the importance of training and education in building up an informational society, the Government provided advanced computers to all high-schools and most secondary schools in the country. This contributed to improving graduates' computer literacy. However, due to a relatively low number of computers and their obsolescence, there are limited possibilities for organising the

learning process on the basis of modern information technologies, as there is one computer per 65 students in the pre-university education system. Only 62 out of 1,619 pre-university educational institutions have constant Internet access.

Long Term Targets by 2015

Building up an information society through the implementation of the *Policy on Building up an Information Society in the Republic of Moldova*, approved by Government Decision no 632 of 8.06.2004 (The Official Monitor of the Republic Of Moldova in 2004, no 96-99, art 786), of the *National Strategy*, currently under development, and of the *Jump Presidential Programme*.

It is expected that by the end of 2015 the number of fixed and mobile telephone lines is going to be at least doubled by 2006, the diffusion rate of fixed telephony will reach 25, and about 151 phone lines are planned to be installed in rural areas in 2005-2007.

In view of ensuring the population's access to an entire range of services offered by information technologies, the number of personal computers and Internet users is planned to increase at a rate of at least 15% per year.

Barriers

- *delayed liberalisation of information and communication services market*, unfair competition, excessive monopoly of the data transmission sector;
- *insufficient financial resources* allocated by the state for the information and communication technologies development;
- *concentration of the information services mainly in big cities*, lack of these services in rural areas.

Long Term Actions by 2015

- *developing and implementing legislation and normative acts* aimed at developing e-governance, e-education, e-science, e-medicine, and e-business;

- *ensuring equal access to information, services and knowledge* for all citizens, taking into consideration the needs of each person and of the entire society;
- *developing an information culture*, training all citizens to benefit from the advantages of an informational society in their daily life and activities;
- *strengthening the society and extending democratic practices* by implementing e-government, protection of personal data, and the inviolability of private life;
- *ensuring economic growth and poverty reduction* by implementing a new stable economy based on information and communication technologies;
- *encouraging and supporting information pluralism*, using information and communication technologies to extend the possibilities of mass media;
- *integrating the country into the regional and international information community* by diminishing the digital gap between the Republic of Moldova and the international community;
- *developing the information infrastructure* and encouraging companies operating in information and communication technologies, especially, those developing new software and/or offering access to information resources;
- *diminishing the digital gap between rural and urban localities* by implementing Universal Access Service.

