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**BETTER
SOCIAL SERVICES**
THROUGH A SUSTAINABLE PARTNERSHIP
BETWEEN THE CIVIL SOCIETY AND THE GOVERNMENT



Co-financed & implemented

BASELINE STUDY

on social services for people
with intellectual and psychosocial disabilities
and for vulnerable children





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ACRONYMS

PA – Public Association

NSAA – National Social Assistance Agency

CPA – Central Public Administration

LPAs – Local Public Administrative Authorities

NBS – National Bureau of Statistics

MHLSP – Ministry of Health Labor and Social Protection

NGO – Non-Governmental Organization

CSOs – Civil Society Organizations

TSAS – Territorial Social Assistance Structure

ATUG – Autonomous Territorial Unit of Gagauzia

EXECUTIVE SUMMARY

The baseline study is carried out under the project ‘Better social services through a sustainable partnership between the civil society and the government’, implemented by the Public Health Department of Soros Foundation – Moldova in partnership with PA Keystone Moldova, The Alliance of Active NGO’s in the Field of Child and Family Social Protection (APSCF) and the Alliance of Organizations for People with Disabilities (AOPD). The project has been implemented between 2018 and 2021, financed by the European Union, where the main aims are: to strengthen the promotion and implementation of innovative solutions by CSOs, in partnership with CPA and LPAs; to advance the social inclusion of people with intellectual and psychosocial disabilities and of vulnerable children.

The **purpose of the Baseline Study** is to document and analyze the current situation in order to identify and inform about future actions to be taken for the project implementation.

Specific aims of the Study are:

- Identifying social services needs for people with intellectual and psychosocial disabilities and of vulnerable children, in each district, based on the mapping of existing social services and research into service needs;
- Identifying existing capacities and training needs to develop the social services for people with intellectual and psychosocial disabilities and for vulnerable children, in each district, based on the research of the existing experiences of CSOs, CPA and LPAs;
- Identifying best practices of partnerships in developing social services for people with intellectual and psychosocial disabilities and for vulnerable children between CSOs, CPA and LPAs at each district level;
- Developing practical recommendations for improving the capacities of CSOs, CPA and LPAs to develop quality social services for people with intellectual and psychosocial disabilities and for vulnerable children.

Study Methodology

In order to conduct the Study, **quantitative and qualitative** methods were used to collect information from multiple actors. The research was carried out at the national level, in **33 administrative-territorial units**: 32 districts and ATUG and supposed:

- **TSAS Survey**, by interviewing the heads of the 33 TSAS on the basis of opinion questionnaire and by applying the statistical data collection form on the dynamics of project target groups, social services available to them, the necessary social services, the coverage of services in each district.
- **Mapping CSOs** in 32 districts and ATUG by identifying CSOs that are active in the social field and are registered locally. Of the 275 CSOs identified and contacted, interviews were conducted with **representatives of 65 CSOs**, who agreed to give an interview based on a structured questionnaire.
- **Conducting 12 focus group discussions** involving a number of 99 people, 7-10 people per group. To carry out the focus groups, 2 districts from each region (North, Centre and South) were selected, according to the service coverage criterion: the district with the highest service coverage for people with intellectual and psychosocial disabilities and for vulnerable children and, respectively more service beneficiaries, and the district with the lowest service coverage for these two target groups and number of beneficiaries. Two focus group discussions were conducted in each of these two districts: a discussion with service providers, beneficiaries and potential service beneficiaries.
- **Conducting 3 individual in-depth interviews with MHLSP representatives**: Head of Department for the Protection of Family and Children’s Rights Policies of MHLSP, Head of Department for the Pro-

tection of the Rights of Persons with Disabilities Policies of MHLSP and Head of Department for Social Service Inspection of the Social Inspection.

Data were collected and processed by the sociological company CIVIS between 20 June and 10 September 2018 and the report was prepared by the independent expert Ludmila Ciocan, contracted for this purpose by Soros Foundation-Moldova, based on the public contest held.

The main findings of the Study, resulting from on-site research and ex-officio analysis of different data sources, including policy papers, statistical data, available studies, and research relate to the following:

Service needs for children in vulnerable groups

- Statistics show that the number of children in the Republic of Moldova is steadily decreasing¹, at the same time, the analysis of data provided by the 33 TSAS participating in the research reveals **a general nationwide upward trend in the number of vulnerable children during 2015-2017 from 31,117 in 2015 to 34,443 in 2017.**
- The mapping of social services for children in vulnerable groups in the 33 administrative-territorial units reveals **an uneven and insufficient development of these services at the local level.**
- The dynamic analysis of services over the past 3 years reveals that only 10 out of 33 TSAS have developed new services for vulnerable children during the period 2015-2017. The social services developed by TSAS are of 6 types: Family-type Home (Basarabasca, Criuleni, Donduseni, Dubăsari and Riscani), Foster Care (Drochia, Glodeni, Rezina and Riscani), Family Support (Calarasi and Taraclia) Community Home for Children at Risk (Dubasari) and Residential Care Center (Donduseni).
- According to the results of service mapping in the 32 districts and ATUG, it results that only part of the social services for vulnerable children is accredited². The services with the highest rate of non-accreditation are Family-type Home and Day Care Center for Children with Disabilities.
- Discussions with **beneficiaries and potential service beneficiaries show that they often lack access to services or have limited access, including in districts with high service coverage**, for various reasons: the large distance from home to the available services; lack of transport in general or lack of transport adapted to children with disabilities; the discrepancy between the beneficiary's needs and the offer of services; the long waiting time between service demand and service offer; bureaucratic process of preparing the documents for accessing certain services; the limited number of places available in services due to their poor funding; the lack of information on the availability of services; lack of confidence in the possibility of benefiting from any service, due to previous refusal, etc.
- 30 TSAS presented data on the number of vulnerable children in their own district that require social services, whereas 3 TSAS (Cimislia, Riscani and Singerei) do not have such data.
- As far as social services need to be developed at the local level and are concerned that the most **TSAS opt for creating or expanding home-based support services for children and/or to prevent child abandonment** (Mobile Team, Personal Assistance, Respite Care, Day Care Centre, Parent-Child Centre) and for creating or extending **family-type care services** (Foster Care, Family-type Home). At the same time, 10 TSAS also focus on the need to create **Residential Care Centres** at the local level, and 3 TSAS see the necessity to create **Multifunctional Community Centres** without specifying the types of services requiring to be provided within these Centres.
- The analysis of the required services must be developed or extended, presented by TSAS, reveals in many districts **the need for specialized services for children in conflict with the law and children with deviant behaviour that are currently lacking.**

¹ National Bureau of Statistics, The Situation of Children in the Republic of Moldova in 2017. <http://www.statistica.md/newsview.php?l=ro&idc=168&id=6017>.

² Law no. 129 of 08.06.2012 on the Accreditation of Social Services Providers. The accreditation confirms the ability of the provider to offer quality services, respecting the minimum quality standards <http://lex.justice.md/viewdoc.php?action=view&view=doc&id=344610&lang=1>.

- Parents and representatives of beneficiaries and potential beneficiaries of services mentioned **other types of services that would meet their needs**: transport services adapted to the needs of the children with disabilities as to access educational institutions, social services, health care services; free leisure services for children in rural areas; playgrounds with adapted equipment for children with disabilities; rehabilitation services, massage cabinets; after school services, where children can benefit from supervised Internet access after school as a support for homework, or playing games; setting up leisure parks; psychological professional services.
- 42% of TSAS are not able to estimate service coverage for vulnerable children, based on the number of current service beneficiaries and the number of potential beneficiaries (children requiring services but not benefiting from them). At the same time, 3 TSAS do not estimate the service coverage ratio for vulnerable children due to the lack of data that say the number of children who need social services.
- **The estimated percentage of people with intellectual and psychosocial disabilities was about 16%³ in the total number of people with disabilities, according to statistical data available for 2015.** The National Mental Health Program for 2017-2021⁴ shows that there is 30.8 thousand people with certified intellectual and psycho-social disabilities in 2015, and according to the National Bureau of Statistics data, the total number of persons with disabilities is about 184.5 thousand in the same year⁵.
- **About 59 thousand people** are registered in the 35 Mental Health Community Centres (5 at municipal level, 30 at district level) established within the framework of the mental health reform. The specialists of these Centres recommend the hospitalization to 6344 people and **orientation to social services to 6028 people**, during 2015⁶.
- **No disaggregated statistical data by type of disability are available at national level.**
- The research sought to collect data on the number of people with intellectual and psychosocial disabilities TSAS and on the number of potential beneficiaries of services per district. **Only 27 TSAS (about 82%) provided data on people with intellectual and psychosocial disabilities in reference districts.** In the case of 6 TSAS, the data collection specialists mentioned that they do not have data because they do not record the types of disabilities.
- The total number of people with intellectual and psychosocial disabilities registered with 24 TSAS show a **slight upward trend, from 12,063 in 2015 to 12,906 in 2017.**
- Considering that in the structure of primary disability the mental and behavioral disorders have a prevalence of 24% among children and 14,4% among 18-29 age group⁷ and 16% of the total number of people with disabilities have intellectual and psychosocial disabilities, we notice that in the case of many districts **the number of people with intellectual and psychosocial disabilities has been underestimated by TSAS.** We note that 14 of 33 TSAS included services for people with other disability types as well as services for older people in the list of services available for people with intellectual and psychosocial disabilities during the services mapping process. At the same time, there are missing disaggregated data, which would reflect how many beneficiaries of these services are with intellectual and psychosocial disabilities and how many beneficiaries are with other types of disabilities.
- According to the analysis carried out by the MHLSP, the following types of specialized social services for people with intellectual and psychosocial disabilities were functioning at the local level

³ Author's calculations.

⁴ Government Decision no. 337 of 26.05.2017 for the approval of the National Program on Mental Health for the years 2017-2021 and the Action Plan for its implementation. <http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=371376>.

⁵ National Bureau of Statistics, The Situation of People with Disabilities in the Republic of Moldova in 2016. http://www.statistica.md/public/files/ComPresa/Demografie/Situatia_pers_dizabilitati_2016.pdf.

⁶ Government Decision no. 337 of 26.05.2017 for the approval of the National Program on Mental Health for the years 2017-2021 and the Action Plan for its implementation. <http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=371376>.

⁷ National Bureau of Statistics, The Situation of People with Disabilities in the Republic of Moldova in 2017. <http://www.statistica.md/newsview.php?l=ro&idc=168&id=6191>.

in 2017: 17 **'Supported living'** services (89 beneficiaries); 15 **'Community Home'** services (88 beneficiaries); **'Shared living'** (73 elderly and disabled beneficiaries); 22 **'Mobile Team'** services (620 beneficiaries with different types of disabilities); 6 **'Respite Care'** services (153 beneficiaries with different types of disabilities), **'Personal Assistance'** (about 2620 persons with severe disabilities of different types).

- At the same time, about **2,000 people with intellectual and psychosocial disabilities are placed in 6 republican residential care institutions subordinated to NSAA**. These persons are to be non-institutionalized, according to the provisions of the National Program for non-institutionalization of persons with intellectual and psychosocial disabilities in the residential care institutions managed by NSAA for 2018-2026 approved by the Government.⁸
- Regarding to the accreditation of community services for people with intellectual and psychosocial disabilities, we find that most of the specialized services such as Community Home and Supported Living have been accredited. The majority of support services such as Mobile Team and Personal Assistance for people with all types of disabilities have been accredited, also. The Shared Living Service is not accredited in any of the 6 districts where it is available and the Respite Care is not accredited in most cases. Note that **some districts (Cahul, Edinet and ATUG) reported the lack of any kind of services for adults with intellectual and psychosocial disabilities at local level**.
- Analysis of social services development dynamics in the period 2015-2017 reveals that the number of newly created services for people with intellectual and psychosocial disabilities at local level is very low compared to the estimated service needs for this target group. TSAS has developed only 3 types of services: Shared Living (Basarabasca and Orhei), Mobile Team (Causeni, Floresti, Taraclia and ATUG) and Medico-Social Care Centre (Floresti) in the last 3 years.
- People with intellectual and psychosocial disabilities and their relatives reported various difficulties caused by the lack of local services and limited access to health services, social assistance, employment, etc.
- In the research, TSAS provided data on the number of people with intellectual and psychosocial disabilities, for whom it is necessary to develop different types of social services at the local level. Note that **8 TSAS from Causeni, Cimislia, Ialoveni, Ocnita, Riscani, Singerei, Soroca and Taraclia districts do not have data regarding the number of persons with intellectual and psychosocial disabilities that require social services**.
- **Estimates of 76% of TSAS who provided data show that 3693 people with intellectual and psychosocial disabilities in the 25 districts require social services, but they still do not benefit from them due to the lack of these services at the local level**.
- The analysis of the list of services that need to be developed, according to TSAS, indicates that **13 out of 33 TSAS proposed residential care services at local level**, which in fact means the temporary or permanent institutionalization of this group of people. **For the other 19 TSAS, we note the need to develop support services** (Personal Assistant, Mobile Team, Respite Care, Day Care Centre) **and family-type services** (Shared living) **or community-based homes** (Supported living, Community Home). TSAS from Stefan Voda did not expose its opinion on the need for services for people with intellectual and psychosocial disabilities at the local level.
- Beneficiaries, potential beneficiaries and their representatives consider to develop the following services at the local level: information and counselling services; Respite Care services for adults with intellectual and psychosocial disabilities; day centres equipped with sewing machines, other equipment for occupational activities; qualified psychiatric help; community 'laundry' services; sanatorium (health recovery) services (some beneficiaries see contraindications and discrimination in accessing the existing services).
- **Practically, every 4 TSAS could not estimate the degree of service coverage for people with intel-**

⁸ Government Decision no. 893 of 12.09.2018 on the approval of the National Program for de-institutionalization of persons with intellectual and psychosocial disabilities placed in residential care institutions managed by the National Social Assistance Agency for the years 2018-2026 and the Action Plan for its implementation. <http://lex.justice.md/index.php?action=view&view=doc&lang=1&id=377713>.

lectual and psychosocial disabilities, due to the lack of data on this group of people. In most cases when TSAS holds data, there are large divergences between estimates made by TSAS and the sociological company CIVIS.

Challenges on the development and provision of social services at local level

- Key challenges mentioned by representatives of service providers during focus group discussions are related to:
 - **High staff turnover**, both within TSAS and within the Community Social Assistance Service, due to inadequate pay and burnout;
 - **The lack of qualified specialists at the local level** who could provide psychological counselling, speech therapy, physical therapy, etc. in different services;
 - The lack of psychiatrists in some districts and **the low quality of the services provided by the Mental Health Community Centres** and therefore different difficulties in assisting people with intellectual and psychosocial disabilities;
 - **The lack of equipment** for lifting, transport, personal hygiene of persons with physical disabilities (adults and children) within the Community Centres;
 - **The lack of transport** to reach beneficiaries and / or to ease the access of beneficiaries especially from rural areas, to services available in the district centre or urban localities;
 - **People's interest in monetary benefits rather than in social services;**
 - **The unfavorable location of buildings where social services are provided** (in suburban areas, away from the city centre), which are hardly accessible to the beneficiaries;
 - **The lack of services, at least at the regional level, for street children, children in conflict with the law, children with deviant behaviour, mother-child couples** and, respectively, the referral of these beneficiaries to services at republican level;
 - **Poor cooperation with health care facilities** when providing assistance to children temporarily placed in community services, but also to people with intellectual and psychosocial disabilities;
 - **The impossibility to provide social services to people with disabilities who are not classified as disabled**, although severely disabled, due to restrictive admission criteria imposed by their regulations;
 - **Bureaucratic aspects when filling in different forms, containing the same information, both in paper and electronic format**, which implies an excessive workload with documentation to the detriment of working with the beneficiaries;
 - **Difficulties in implementing the new case management and records of vulnerable children;**
 - **Insufficient and timely methodological support by MHLSP** by implementing the new legal provisions, amendments to normative acts, which concern social services;
 - **Government allocation of considerable financial resources for social assistance, monetary support the detriment of social services financing** (some mention that in many cases this money is inadequately used by parents (alcohol, cigarettes) and children do not benefit effectively from it, remaining thus in a risky situation);
 - **Expenditure rules to maintain beneficiaries in different types of services do not correspond to the present market prices**, which lowers the quality of provided services;
 - **Inadequate financing of social services by LPAs.**

- Based on the mapping of social services in 32 districts and ATUG, we find that LPAs have maintained funding for the majority of services for vulnerable children and persons with disabilities in the period 2015-2017. However, we also find cases of significant budget cuts for different types of services for the two target groups, as well as cases of reorganization of services or the cessation of their activity.
- In order to ensure the financial sustainability of social services at local level, on 22 March 2018, the Parliament of the Republic of Moldova voted, in the first reading, a draft law on the **provision of a minimum package of social services** financed through special transfers from the State Budget to the budget of the administrative territorial units⁹. The minimum package of services included **4 types of social services** (Family-type Homes, Foster Care, The Support for Families with Children, and Personal Assistance for People with Severe Disabilities). The interviews with representatives of MHLSP show that, in fact, **5 types of services** have been proposed: the 4 services listed above and the Monetary Support for People in Difficulty. On 1 August 2018, the Government approved the minimum social service package consisting of Monetary Support for Disadvantaged Families / People, Support for Families with Children and Personal Assistance).
- We find out that family-type services for children at risk or separated from their parents are not included in the minimum package of services. We also note that the minimum package does not contain any community based services as alternative to residential care institutions to help the non-institutionalization and to prevent the institutionalization of people with intellectual and psychosocial disabilities.

TSAS capacities and training needs

- As a result of self-evaluation of social services capacities by 33 TSAS, we find out that several TSAS believe that they **have good and very good capacities** regarding to the following: identifying the needs of social services for children from vulnerable groups (79% of respondents); accreditation procedure for social services (79% of respondents); budgeting of social services based on programs / sub-programs and on performance (70% of respondents); providing social services in partnership with CSOs (70% of respondents); monitoring and assessing the quality of social services (67% of respondents) and the annual planning of the development and delivery of social services according to identified and assessed needs (58% of respondents).
- At the same time, several TSAS representatives state that they have **average capacities** rather than good capacities in: planning to develop a medium-term social service system based on a dynamic analysis of needs (49% of respondents); dynamic analysis of social service needs (46% of respondents); identifying social service needs for people with intellectual and psychosocial disabilities (43% of respondents), and identifying financial resources to develop and deliver social services, according to identified needs (40% of respondents).
- Although, practically half of the TSAS notes **lack of capacities or reduced capacities** in at least one of the social service issues, we note that the following issues are mentioned by many respondents as weaknesses: involving potential beneficiaries in the planning of services for them (39% of respondents or 13 out of 33 TSAS); identifying financial resources for developing and delivering social services, according to identified needs (24% of respondents or 8 out of 33 TSAS); providing social services in partnership with other LPAs (18% of respondents or 6 of 33 TSAS); identifying social service needs for people with intellectual and psychosocial disabilities by LPAs (18% of respondents or 6 out of 33 TSAS) and systematically assessing beneficiaries' satisfaction with services delivered (12% of respondents or 4 out of 33 TSAS).
- More than half of the interviewed TSAS representatives (55% of respondents) said they had no **projects writing experience** in the field of social service development and provision, 21% – have little

⁹ Parliament of the Republic of Moldova, Press release of March 22, 2018 placed on the Parliament 's website. <http://www.parlament.md/Actualitate/Comunicatedepresa/tabid/90/ContentId/3927/language/ro-RO/Default.aspx>.

experience, 12% – have only writing experience in partnership with other organizations and 12% of respondents mention that they have much experience in writing projects.

- During the last 3 years, only one TSAS has developed 8 project proposals and another 9 TSAS have developed between 1 and 3 proposals, with a total number of 27 project proposals. At the same time, the number of TSAS that implemented projects in the field of social services is higher than the number of those who have developed projects. Thus, **20 out of the interviewed 33 TSAS have implemented 64 projects in the field of development and provision of social services in the last 3 years, due to partnerships with CSOs.**
- Among the first CSOs, most often mentioned by TSAS, with the largest contribution to implement a significant number of projects in the field of social services is: PA 'CCF Moldova – Child, Community, Family', PA 'Concordia. Social Projects', PA 'Keystone Moldova' and PA 'Partnerships for Every Child'.
- We find that 46% or 15 of 33 TSAS interviewed have experience of implementing projects funded by the European Union.
- As far as their **knowledge** of social services is concerned, some of TSAS state that they have little knowledge or no knowledge and, respectively, **the need to be trained** on the following issues: how to set up public-private partnerships (45% respondents), how LPAs or CPA can contract social services from the CSO (42% of respondents), how to provide social services through public-private partnership (36% of respondents), how to identify the needs of social services for people with intellectual and psychosocial disabilities (16% respondents), types of budgeting and financing of local social services by the state (12% of respondents), national policies on the development of social services for people with intellectual and psychosocial disabilities (10% of respondents) and types of social services existing in the Republic of Moldova for this group of population (9% of respondents).
- At the same time, we find out that several TSAS interviewed know only extent issues listed above and **require capacity training. The accreditation procedure for social services, the monitoring and assessment of social services** are also topics that require deepening in the case of 42% and 46% of respondents, respectively.
- In addition to these issues, 15% of the interviewed TSAS representatives reported on the need for training in **social service management**. Also, some TSAS representatives expressed interest in **methods, techniques and working tools with certain categories of beneficiaries** (children in conflict with the law, children at risk, and families with children with disabilities, people with intellectual and psychosocial disabilities, victims of violence, etc.).

CSO capacities and training needs

- The process of identifying CSOs active in the 32 districts and the ATUG was difficult, as **the number of local public associations is unknown at the national level.**
- **About 65% of CSOs contained in the State Register of Non-Commercial Organizations are located in Chisinau municipality.**
- During the research, **275 CSOs working in the social sphere were identified in the 33 administrative-territorial units** (32 districts and ATUG), of which only 65 CSOs (24%) consented to give an interview.
- 14 CSO interviewed that are located in the South region, 30 – in the Centre region and 21 – in the North region. We specify that at least one CSO has been interviewed in each district, and in some cases several CSOs in the same district. 27 out of 65 CSOs interviewed are in rural areas and 38 CSOs – in urban areas.
- According to the information provided by the interviewed CSO representatives, 18% – have their own office, 17% – own part of the office space and 65% – do not have their own office.

- About two-thirds of CSOs have all the furniture and office equipment necessary to carry out their activities.
- Only 15% of the interviewed CSOs have a company car and the other CSOs do not have any means of transport.
- On average, one CSO has about 6 employees; however, 11 of the 65 interviewed CSOs (17%) report that they have no employees and use volunteers to carry out their activities. More than 1/3 of the CSOs have up to 3 employees and less than 1/3 CSOs currently employ between 4 and 9 people.
- According to CSO Sustainability Index – 2017¹⁰, over 80% of CSOs funding sources come from foreign donors, with the European Union being one of the most important donors.
- During the research, we find that about 2/3 of the local interviewed CSOs do not have financial resources for the implementation of activities in the next year (2019) and only 8% of the CSOs have the necessary resources and 26% of the CSOs have some resources required to continue working in 2019.
- **51 of the 65 interviewed CSOs elaborated 436 project proposals** and presented them to donors for funding in the period 2014-2018. During the same period, a total number of **248 projects were implemented or are still in the process of implementation by 50 CSOs.**
- Interviews reveal that **23% of CSOs who participated in the research did not implement any project during 2014-2018**, although six of them submitted project proposals to donors.
- According to the data provided by the interviewed CSOs we find that **most CSOs have implemented small projects up to EUR 5,000 (33%)**; 21% of the CSOs have managed projects over EUR 30,000, 17% of the CSOs have implemented projects with budgets between EUR 5,100 and EUR 10,000 and respectively 11% of the CSOs manage projects from EUR 11,000 to 30,000 during 2014-2018.
- **Only 42** out of the 50 CSOs that reported that they had implemented projects during 2014-2018, **provided information on the budget of the implemented projects. The analysis of data shows that during the reference period the 42 CSOs have implemented projects in a sum of EUR 5,347,342.00.**
- **The smallest project implemented by a CSO is worth EUR 150, while the largest project has a budget of EUR 780,000.** Most projects tend to have a budget of about EUR 7,000.
- According to interviewed CSO respondents, 79% of CSOs included in research have experience to provide social services to vulnerable children and 64% of CSOs have experience to work with people with intellectual and psychosocial disabilities.
- Despite the experience, a significant part of the interviewed CSOs states that they have **little or no knowledge** of the following aspects of social services:
 - How can LPAs or CPA contract social services from CSOs (40% of respondents)
 - Accreditation procedure of social services (40% of respondents)
 - Methods of establishing public-private partnerships between LPAs or CPA and CSOs (39% of respondents)
 - Provision of social services through public-private partnership between LPAs or CPA and CSOs (38% of respondents)
 - National policies on the development of social services for people with intellectual and psychosocial disabilities (37% of respondents)
 - Types of social services existing in the Republic of Moldova for people with intellectual and psychosocial disabilities (36% of respondents)
 - Identification methods of service needs for people with intellectual and psychosocial disabilities (33% of respondents).

¹⁰ 2017 Civil Society Organizations Sustainability Index – Moldova. <http://management.md/wp-content/uploads/2018/10/Indexul-Sustentabilit%C4%83%C8%9Bii-OSC-urilor-din-Moldova-2017.pdf>.

- National policies on the development of social services for vulnerable children (33% of respondents)
 - Monitoring and evaluation of social services (30% of respondents)
 - Methods of budgeting and financing of social services by the State (29% of respondents)
 - Types of social services existing in the Republic of Moldova for vulnerable children (26% of respondents)
 - How to identify the needs of social services for children in vulnerable groups (16% of respondents).
- We mention that these would be the main topics of interest for CSO training in the context of creating public-private partnerships to develop social services for the project target groups. Half of the interviewed CSOs mentioned **other training needs**. Topics of interest for training, which were further specified by the interviewed CSOs, concern the following areas: project writing and management; attracting financial resources for social services; financial sustainability of social services; minimum quality standards for social services; social innovation; employee performance assessment; employee empowerment (for example, psychologists, social workers) working with specific groups of beneficiaries; empowerment of parents with disabled children; providing first aid to various vulnerable groups within services. Also, some CSOs have expressed interest in having a more in-depth understanding of the legal framework in the field of violence for different groups of people (women, elderly people, children, people with disabilities).

Partnerships and cooperation in the field of social services

- **MHLSP representatives claim that the institution they represent has cooperation agreements with CSOs operating in the social sphere.** As a good practice of partnership in the field of child rights protection and development of services for vulnerable children, the following CSOs were mentioned: PA ‘Partnerships for Every child’, PA ‘Lumos Foundation Moldova’, PA ‘CCF Moldova – Child, Community, Family’, PA ‘Terre des hommes’ Foundation, PA ‘Keystone Moldova’, National Centre for Child Abuse Prevention (CNPAC). PA ‘Keystone Moldova’ was mentioned as the main partner in the field of development of community services for people with intellectual and psychosocial disabilities and the Institute for Human Rights in Moldova (IHRM) – in the area of the rights of people with disabilities.
- **Research reveals that 32 out of 33 interviewed TSAS have collaborative agreements or established partnerships with CSOs** to develop and deliver social services. The 32 TSAS have indicated **36 CSOs** among the CSOs with which it works best. The most important organizations that TSAS believes it cooperates best with are: PA ‘CCF Moldova – Child, Community, Family’ (referred to by 22 of 32 TSAS); PA ‘Concordia. Social Projects’ (referred to by 15 of 32 TSAS); PA ‘Keystone Moldova’ (referred to by 13 of 32 TSAS); PA ‘Partnership for Every Child’ (referred to by 11 of 32 TSAS); PA ‘CERI Moldova’ (referred to by 9 of 32 TSAS); CNPAC (referred to by 4 of 32 TSAS), and PA ‘Lumos Foundation Moldova’ (referred to by 4 of 32 TSAS). We note that these organizations are active at national level, most of them being registered in Chisinau, and organizations working locally are rarely mentioned by TSAS.
- **Social services developed under the TSAS and CSO partnerships** mentioned by most TSAS are: Mobile Team, Community Home, Foster Care, Family-type Home, Family Support, Parent-Child Centre, Social Canteen, Day Care Centres for different categories of beneficiaries, Residential Care Centres for different categories of beneficiaries, Respite Care, Personal Assistance and Supported Living. In addition to these services, some TSAS have also specified services such as: Paralegal (primary legal counselling services provided by paralegals at the local level)¹¹, Panda (Educational support

¹¹ Decision of the National Council for State Guaranteed Legal Assistance no. 27 of 29.10.2014 on the approval of the Regulation of Paralegals Activity. <http://lex.justice.md/md/356312/>.

program for children and parents living with people addicted to alcohol)¹², Early Childhood Intervention, Psycho-Pedagogical Assistance, Services for Gifted Children, Leisure Services for Children, Home Health Care, and Social Home Care.

- **About half of the interviewed TSAS have reported that they are not working with other LPAs** to develop and deliver social services. According to the 16 TSAS that have stated that they cooperate with other LPAs, the best collaboration is registered with first level LPAs within the district (88% of cases). Only 2 TSAS mentioned that they also collaborate with second level LPAs from other districts in the field of social services (12% of cases of collaboration).
- As regards the quality of collaboration between different entities (CSOs, LPAs, mass media) in the field of social services for vulnerable groups, **TSAS appraises the cooperation relations between CSOs and LPAs, LPAs and the media and respectively CSOs and the media as moderate to good**. At the same time, TSAS consider that the CSOs themselves do not cooperate sufficiently with each other, which is contrary to the CSOs report (82% of the interviewed CSOs claim that they have signed partnership agreements and collaborate with each other).
- **The vast majority of the interviewed CSOs (89%) have partnership agreements with first level LPAs** for project development / implementation / monitoring, **72% of CSOs have established agreements with second level LPAs and 35% of CSOs have partnerships with CPA**. We mention that 29% of the interviewed CSOs have collaboration agreements with both the first and second level LPAs and the PCA. In 82% of the cases, CSOs included in the research have collaborative agreements with other CSOs for the development, implementation or monitoring of projects of common interest.
- Interviewed CSOs claim that they have experience of collaborating with LPAs or CPA in developing and / or delivering social services for the following groups of beneficiaries: vulnerable children (72%), adults with intellectual and psychosocial disabilities (49% of cases). We note that **89% of CSOs involved in research collaborate with the media to promote innovative projects**.
- As regards the quality of collaborative relationships to develop services for vulnerable groups, **CSOs believe that they have a good collaboration with the LPAs in the district, followed by the media**, and the relationship with CPA is appreciated as a moderate collaboration.

The main findings of the Study target the following aspects:

The development of a qualitative social service system that responds efficiently and immediately to the needs of the most vulnerable groups of population is essential to ensure their rights and their social inclusion.

The mapping of existing services at the local level for vulnerable children and people with intellectual and psychosocial disabilities reveals a substantial difference in the availability of services for these two target groups. At least 2-3 types of services for vulnerable children exist in each district, but we discover districts where no service for people with intellectual and psychosocial disabilities is available.

The research highlights that the current offer of social services available at the local level does not meet the needs and fails to respond effectively to the vulnerable-increasing trend among children and people with intellectual and psychosocial disabilities, including in regions that have developed a wide variety of services.

Planning and development of social services is a complex process that needs to be based on up-to-date target groups data, on the dynamic analysis of their needs, and on a good ability to identify and record cases. Research shows a reduced capacity of TSAS and, implicitly, community social assistance service in estimating the need for social services of target groups. If there is a better data record for vulnerable children, in the case of persons with intellectual and psychosocial disabilities, practically 1/4 of the districts do not have any data. This is due to the fact, that no methodology for collecting data by type

¹² Ministry of Health, Labor and Social Protection, Press release of 23.05.2017 placed on the Ministry's website. <https://msmps.gov.md/ro/content/presedinta-fundatiei-oak-kathleen-cravero-kristoffersson-moldova-este-o-tara-unde-poti-vedea>.

of disability is approved at national level. Moreover, national legislation defines disability and its types in accordance with the provisions of the United Nations Convention on the Rights of People with Disabilities, but the type of disability is not defined in the process of determining disability.

Despite the fact that estimating service coverage for the target groups was challenging for TSAS, most TSAS expressed their opinions on the types of social services that are needed to be developed and / or expanded locally. We note that some TSAS are still geared towards creating residential care centres, conglomerates of services that involve isolation rather than inclusion, especially for people with intellectual and psychosocial disabilities. However, services must be based mainly on providing the necessary support to the family and community beneficiaries for the prevention of institutionalization, as well as for non-institutionalization. In case the beneficiary cannot remain in the family, creating alternative family-based services (in the case of children) and community housing (in the case of adults) are important.

The research reveals that LPAs face problems and difficulties in the process of developing and providing services, which are related to many aspects such as: low availability of local specialists and high turnover of staff in the social assistance system, lack of the transport and necessary equipment, poor cooperation with other institutions, difficulties in implementing the legal framework and newly approved methodologies, etc. The biggest challenge in developing new services and maintaining existing services is the lack of financial resources, which is more pronounced in low-budget districts.

The administrative and financial decentralization policy has transferred the responsibility of the social services financing to the local level, and many LPAs have not been prepared to cope with this change, which has had a negative impact on the development of social services.

In order to ensure the financial sustainability of social services at local level, the Government has adopted a minimum package of social services, which are financed at the beginning of this year through special transfers from the State Budget to the budget of the administrative territorial units. The minimum package includes: monetary support for disadvantaged people, family support (including money support) and personal assistance for people with severe disabilities. We find out that the minimum package includes no family-type service for children at risk or separated from their parents, no community based service as alternative to residential care institutions for people with intellectual and psychosocial disabilities. However, these are the services that many LPAs cannot finance from the local budget, which implies the risk of compromising the implementation of national policies on deinstitutionalization and prevention of institutionalization.

In order to ensure qualitative social services at the local level, which fit to minimum qualitative standards, increasing continuously human resources, working in the field of social assistance and maintaining the qualified staff in the system is crucial. The research reveals a turnover of staff within TSAS and social services, as well as their reduced capacity to provide qualified assistance to beneficiaries in various situations of risk and social exclusion. The lowest capacity is registered in the following areas: identification of service needs and provision of services to children in conflict with law, children with deviant behaviour, and to adults with intellectual and psychosocial disabilities.

The research highlights an active involvement of CSOs to develop and to deliver social services to various disadvantaged groups, including vulnerable children and people with intellectual and psychosocial disabilities. We note, however, that CSOs, that have had a major impact on the development of social services at the local level, are organizations registered in Chisinau and active at the national level. Local CSOs are less visible in this process, and most of them have low capacities to develop social services, although most of them provide different services to beneficiaries.

Both current research and other studies on CSOs show that only 1/4 of CSOs registered in the Republic of Moldova are active. The interviews with local CSOs show that many of them have not implemented any projects in the last 5 years, although some have submitted project proposals to donors. Most CSOs have implemented small projects worth up to EUR 5000, but we note that 21% of the CSOs still have experience in managing large projects, with budgets between EUR 30,000 and 780,000, including the European Union funds.

Regarding to the necessity for training and building the local CSOs in the field of social services, we note their increased interest in aspects such as: social services contracting by LPAs or CPA from CSO, accreditation of social services, public-private partnerships in the provision of social service policies, national policies on service development for target groups, types of services available to those groups, minimum quality standards for social services, identification of service needs, monitoring and assessment of social services, budgeting and financing of services by the State.

Interviews with local CSOs indicate that half of them also require training to enhance organizational capacity, including in writing and managing projects; attracting financial resources, social innovation, assessing employee performance, empowering employees working with specific groups of beneficiaries.

We find that at the national level there is generally a good practice of cooperation between the CPA, LPAs and CSOs in the field of social services for different groups of population, including vulnerable children and people with intellectual and psychosocial disabilities. The research reveals that there are partnerships between the majority of interviewed TSAS and CSOs in order to develop and deliver social services. However, we note that both the CPA and the LPAs indicate as partners more national and international CSOs than local CSOs. This is also due to reduced capacities and lack of financial resources of many local CSOs, as well as their lack of experience to develop and apply the innovative social services in partnership with LPAs, although they are focused on delivering services to vulnerable groups.

Recommendations

Based on the findings of the Study, we propose the following recommendations for the development of sustainable social services for target groups through sustainable partnerships between CSOs and the Government:

FOR CPA and LPAs

1. Implementing the system for collecting, storing and recording data on applicants and beneficiaries of social assistance services at both national and local level;
2. Developing and applying a methodology for the collection of data disaggregated by gender, age, type of disability, vulnerable group for applicants and beneficiaries of social services;
3. Reviewing legislative and normative acts in the field of disability to establish the disability types within the disability determination system and to collect disaggregated data by disability types at national level;
4. Designing and implementing an initial and continuous training system in the field of social assistance, including certification of professional training;
5. Developing and periodically updating the database of public and private providers of training in the field of social assistance;
6. Adjusting on a regular basis the training offer based on the analysis of training needs of social service providers;
7. Strengthening the capacities of social service providers and offering them the opportunity to select themes and training modules which are relevant for their activity;
8. Ensuring the quality of training through contracting also private training providers by NSAA in order to offer practical courses for social service providers;
9. Revising the wage-earning system for social workers to attract and support qualified staff in the system;
10. Extending the minimum package of social services by introducing additional services such as Foster Care, Family-Type Home and Community Home for people with disabilities.

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11. Developing and approving minimum cost standards per beneficiary for each social service introduced in the minimum service package;
 12. Establishing the criteria for the distribution of financial means to implement the minimum package of services in each administrative territorial unit;
 13. Proportional and equitable allocation of financial resources through special transfers from the State Budget to the budget of each administrative territorial unit;
 14. Ensuring the transparency of financial resources used for social services through the annual publication of reports by NSAA and TSAS that reflect the number of beneficiaries, the number of staff units and the costs for each type of provided service.
 15. Contracting from the public budget the CSOs able to provide qualitative social services for the target groups of beneficiaries based on assessed needs.

For the Project Team and CSO

1. Conducting advocacy and lobbying activities with CPA and LPAs to ensure the financial sustainability of services for local target groups, including by extending the minimum package of social services;
2. Developing sustainability plans for social services carried out under the project from the early stage;
3. Providing flexibility to subcontracted CSOs in developing and reviewing social services in line with the dynamics of local target group needs within the limits of approved budgets;
4. Ensuring accessibility of services created under the project, both at the infrastructure level of buildings and related spaces, as well as transport and equipment, so that services can be used by people with disabilities (children and adults);
5. Involving the community and volunteers and empowering them in the development of services at the local level, especially of those that do not require a certain degree of specialization or qualification;
6. Monitoring continuously services developed at the local level, involving both LPA and CSOs;
7. Establishing multiple local partnerships (LPA II, LPA I, CSOs, economic agents, media) in order to develop new services, expand and / or access existing services;
8. Empowering CSOs and LPAs by organizing joint training and exchange of experience;
9. Disseminating best practices and results at all stages of social service development and encouraging CSOs and LPAs to apply the lesson learned and the gained experience in their activity.

