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ANALYTICAL NOTE

# Analysis of the distribution and management of humanitarian and social assistance for COVID-19

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# I. Accessibility of information provided by the Ministry of Health, Labour and Social Protection (MHLSP) regarding the handling of social situation and humanitarian assistance during the pandemic.

MHLSP presents comprehensive information on external direct donations, indicating the do-nor, type of goods, quantity, value of donation, date of receipt and final beneficiary.

But in the case of centralized external donations, information on the final beneficiary is missing. The general public receives information only up to the stage of who is responsible for custom clearance, storage and/or distribution. A good example to follow is the table on the distribution of internal donations that shows very explicitly the final beneficiary (the medical institution) for each centralized donation.

In general, it is appropriate for MHLSP to change the way external assistance data is presented during the pandemic, by replacing the Excel table with an interactive map and accessible charts. The platform [tender.health.md](https://tender.health.md)<sup>1</sup> and the link to which is placed on the MHLSP website under the heading “report on donations provided” can serve as a model in this regard.

Although several documents stipulate the responsibility of MHLSP to assess the needs of the medical system during the pandemic, there are no concrete data on such assessments in the public space. Accordingly, it is not clear what are the criteria for the centralized distribution of external humanitarian and social assistance.

Given that the normative framework provides for the MSMPS obligation to present to the Government and the Ministry of Finance the general report on the reception, distribution

and use of material values and money received as humanitarian aid, it is requested for these official reports to be systematically published in the format sent to the Government.

At the same time, it is necessary for the MHLSP to renew more often the information on humanitarian aid; -centralized assistance was last updated on January 11, 2021 and direct assistance - in December 2020. Especially since the MHLSP promised at the beginning of the pandemic to update this information weekly.

The official website of MHLSP provides access to official data, statistics and decisions adopted in the context of pandemic management from a social point of view. Thus, MHLSP has published 33 protocols and guidelines and adopted 62 orders to fight COVID-19. Also, the COVID-19 Preparedness and Response Plan, Report on COVID-19 infection response measures (January - December 2020), MHLSP Activity Report (January - December 2020), 28 newsletters developed during the pandemic are available to the general public.

At the same time, the official website of the MHLSP is lacking daily updates on infections, number of tests, number of deaths, number of treated patients with COVID-19. To analyze the trends in the Republic of Moldova from the outset of the pandemic to this moment, it is necessary either to access international resources, or analyze a series of weekly reports on the epidemiological situation published on the MHLSP website.

<sup>1</sup> The platform is created by the Coalition of civil society organizations to comply with the principles of transparency and efficiency in using public money under the conditions of the pandemic and predicted consequences of COVID-19 in Moldova.

## 1) The MHLSP competences of handling the social situation

According to the Decision of the Government of the RM No. 694 of 30.08.2017, the Ministry of Health, Labor and Social Protection (MHLSP) is the central specialized body of public administration that ensures the implementation of government policy in the following areas: health, labor, social protection, demography. The Ministry has the mission to analyze the situation and the problems in covered areas of activity, to develop effective public policies, to monitor the quality of policies and normative acts and to propose justified state interventions that will provide effective solutions in the areas of competence. On March 16, 2020, during the meeting of the National Commission for Emergency Situations, the Minister of Health, Labor and Social Protection presented arguments and proposed to declare the state of emergency.

## 2) The MHLSP competences to receive, store and distribute humanitarian aid during the pandemic:

According to the Regulation on the way humanitarian aid granted to the Republic of Moldova is received, kept, distributed and recorded, approved by Government Decision No. 663/2003, **the humanitarian aid coming into the country is classified as follows:**

1. Supplies sent by the donor to the state or without indicating a concrete receiver and distributed in accordance with the decisions of the Interdepartmental Commission.
2. Supplies sent directly to recipients and distributed by them.

General administration of the reception, storage and distribution of humanitarian aid is carried out by the Ministry. The reception, transportation, storage and

distribution of humanitarian aid shall be carried out by the receiver/distributor. The ministry, jointly with the Interdepartmental Commission, analyzes and evaluates the need for humanitarian aid, identifies the beneficiaries who need such aid first of all.

According to this decision, the general report on the reception, distribution and use of material values and money received as humanitarian aid will be prepared by the Ministry and will be presented quarterly and annually to the Government and the Ministry of Finance.

## 3) Presentation of information about donors by MHLSP:

On 16 April 2020, MHLSP published the list of internal donors (economic agents, representatives of civil society and individuals) and the breakdown of donations (267 internal donors at that time). At the same time, through this press release, the Ministry has committed to update the information weekly, which has not been done.

On 15 May 2020, MHLSP published a report on donations given to the health system during the state of emergency by internal and external donors (386 internal donors and 16 external donors, 397 beneficiaries). Information on the distribution of external donations includes both direct and centralized aid.

In 2021 a new heading appeared on the MHLSP website "Report on donations provided". The Excel table enumerates the full list of external donors - 38. The medical institutions received directly 498 external donations and 233 external donations were centralized. This information was updated last time in January 2021. Each donation includes information about the category of supplies (medicines, protective equipment, medical devices, consumables), name of supply, quantity, value of donation, date of receipt, name of donor, responsible for customs

clearance/distribution (in case of centralized donations), beneficiary (in case of direct donations).

Thus, according to MHLSP data, the largest donors of assistance provided both directly and centrally, include the Government of Romania - 66,68 million lei, the Government of India - 50,58 million lei, the European Union (through WHO) - 45,12 million lei, the World Bank - 31,52 million lei, World Health Organization - 15,47 million lei, UNICEF 12,51 million lei, and the Government of the People's Republic of China - 9,94 million lei, and the Government of the Czech Republic - 8,18 million lei<sup>2</sup>.

#### **4. The MHLSP webpage contains a separate heading "COVID-19 orders", 62 orders in total:**

- a. MHLSP Order No. 253 of 13.03.2020 provides the necessary list of personal protective equipment for the staff of primary healthcare institutions who are in contact with patients suspected of/confirmed with COVID-19 (according to WHO recommendations). However, the equipment availability assessment is not published neither by institution nor by supplies.
- b. MHLSP Order No.294 of 20.03.2020 offers reporting tables for medical institutions, but the request to submit equipment needs data is not included in this table.
- c. MHLSP Order No.505 of 29 May 2020 on the distribution of disinfectants and hygiene products cannot be accessed.

#### **(5) On the MHLSP website were published 152 provisions adopted in 2020 on the distribution of personal protective equipment, and 19 provisions adopted this year.**

The content of these provisions does not present the information on the part of the distributed equipment that comes from external humanitarian aid obtained by Moldova

in a centralized way.

(6) According to "COVID-19 Response Plan" published on the MHLSP website in March 2020, the Ministry, jointly with subordinated institutions, evaluated the available stocks and needs for personal protective equipment, medicines, medical devices, biodegradable, laboratory supplies and the capabilities of medical institutions to provide health care and public health, including laboratory related.

The plan foresees that the mentioned supplies, as well as the mechanisms for supply and distribution, the need for human resources and re-profiling of medical institutions will be re-evaluated based on the scenarios regarding pandemic evolution.

(7) New Coronavirus (COVID-19) Preparedness and Response Plan, version 2, approved by Decision no. 30 of Extraordinary Public Health Commission of September 11, 2020 and published on the MHLSP website, states:

- a. The MHLSP, jointly with its subordinated institutions, shall assess periodically the available supplies and needs for personal protective equipment, medicines, medical devices, biodegradable devices, laboratory consumables, as well as the capacities of medical institutions to provide medical assistance, healthcare and laboratory services.
- b. Above-mentioned supplies, as well as supply and distribution mechanisms, necessity for human and re-profiling resources of medical institutions will be re-evaluated based on the criteria derived from the evolution of the epidemiological situation and other indicators stipulated at the national and territorial level, as well as predictions of COVID-19 evolution.
- c. Creation and maintenance of reserves of medicines, laboratory supplies and PPE are managed by MHLSP, and their delivery to institutions shall be made based on Needs Assessment.

<sup>2</sup> This data is for March 2021. In June 2021, Germany ranks first in the list of donors with 233 million lei, followed by Romania with 123 million lei, the EU / EC with 69 million lei.

**However, that document does not provide concrete figures for the needs' assessment.**

It should be noted that only 6% of the above-mentioned documents (provisions, orders, guidelines) are translated into Russian.

### **(8) Analyses, research**

Several analyses on the effects of the pandemic on social life in the Republic of Moldova, conducted by both development partners and civil society<sup>3</sup>, were published last year.

None of these were published by the MHLSP on its official website under "Studies and analyses".

<sup>3</sup> Some sources analysing how the pandemic influences social life in Moldova:

[https://moldova.unfpa.org/sites/default/files/pub-pdf/analiza\\_riscurilor\\_pandemiei\\_covid\\_19\\_asupra\\_persoanelor\\_in\\_varsta\\_din\\_republica\\_moldova.pdf](https://moldova.unfpa.org/sites/default/files/pub-pdf/analiza_riscurilor_pandemiei_covid_19_asupra_persoanelor_in_varsta_din_republica_moldova.pdf)

[https://www.md.undp.org/content/moldova/en/home/library/inclusive\\_growth/social-and-economic-impact-assessment-of-covid-19-in-the-republi.html](https://www.md.undp.org/content/moldova/en/home/library/inclusive_growth/social-and-economic-impact-assessment-of-covid-19-in-the-republi.html)

<https://www.expert-grup.org/ro/biblioteca/item/2134-care-a-fost-efectul-lockdown-ului-din-2020-si-care-ar-putea-fi-efectul-unui-lockdown-similar-in-2021>

[http://fes-moldova.org/fileadmin/user\\_upload/2020/Publications/Cine\\_plateste\\_factura\\_pandemiei.pdf](http://fes-moldova.org/fileadmin/user_upload/2020/Publications/Cine_plateste_factura_pandemiei.pdf)

<https://pubdocs.worldbank.org/en/453701608708692970/Moldova-Economic-Update-Special-Focus-Dec-22-Romanian.pdf>

[http://fes-moldova.org/fileadmin/user\\_upload/2020/Publications/FES-Analiza-Masurile\\_COVID-19.pdf](http://fes-moldova.org/fileadmin/user_upload/2020/Publications/FES-Analiza-Masurile_COVID-19.pdf)

<https://moldova.un.org/ro/88499-studiu-oim-pnud-migrantii-reveniti-contextul-covid-19-reprezinta-o-opportunitate-pentru>

## II. Accessibility of information provided by the MHLSP regarding the handling of social situation and humanitarian assistance during the pandemic

The website of the Government of Moldova publishes decisions of the Commission for Emergency Situations and National Extraordinary Public Health Commission, including their translation into Russian language. The analysis of these provisions shows that in order to expedite and simplify the reception of humanitarian aid, the Commission for Emergency Situations of the Republic of Moldova, during the state of emergency, intervened in the existing legal framework through provisions derogating from the Law No. 1491/2002 on humanitarian aid, exemption from customs duties, customs clearance fees and VAT on supplies offered from abroad as donation.

The website of the State Chancellery provides access to the public portal of the Foreign Aid Management Platform, which provides a comprehensive description of the projects contracted since 2009 until present. It would be useful to include the information on humanitarian and social assistance provided by donors during the pandemic in the database of that platform. The last report of the State Chancellery on foreign assistance provided to the Republic of Moldova was published on this portal in 2016. Therefore, it is essential to renew the information, the 2020 report should include the analysis of humanitarian external aid to fight COVID-19.

At the same time, it is unacceptable for the information on activity, decisions and recommendations of the Coordination Center regarding the request, use and monitoring of foreign aid provided to fight against the pandemic to not be available on the Government and State Chancellery websites.

### (1) Information provided by the Commission for Emergency Situations of the Republic of Moldova:

During the state of emergency in 2020, based on its provisions, the Commission for Emergency Situations of the Republic of Moldova issued 14 decisions that stipulate:

- a. Derogation from the provisions of Article 141<sup>1</sup> of Law No. 1491/2002 on humanitarian aid granted to the Republic of Moldova and granting permission to receive humanitarian aid directly by the medical institution beneficiary of such aid;
- b. Exemption from customs duties, customs clearance fees and VAT on supplies offered from abroad as donation for the needs of public medical and sanitary institutions in the Republic of Moldova.

According to Provision No. 10 of the Commission for Emergency Situations of the Republic of Moldova of March 31, 2020, point. 17, Joint-Stock Company "SanFarm-Prim" is designated as a pharmaceutical warehouse for the reception and release of protective equipment donated or procured for the beneficiary public medical and healthcare institutions according to the MHLSP distribution. All procedures for receiving, storing and releasing protective equipment donated or procured, according to the MHLSP Decision, shall be carried out and ensured by the Joint-Stock Company "SanFarm-Prim" free of charge.

On April 8, 2020 the Commission for Emergency Situations of the Republic of Moldova

by its Provision No.15, point 6, has established the Foreign Assistance Coordination Center to eliminate consequences of the COVID-19 pandemic within the State Chancellery (hereinafter - the Coordination Center) and approved its Regulation. It is an inter-institutional structure, without legal entity status, created for the period of the state of emergency and the period immediately following the state of emergency, based on the partnership principle and empowered with functions of receiving, coordinating and monitoring cross-sectoral requests for external assistance related to the elimination of the COVID-19 pandemic consequences.

The coordination center has the goal to improve the targeting and use of external aid aimed at eliminating the consequences of COVID-19 pandemic, including by centralizing support requests, streamlining the exchange of information, communication and active participation of all stakeholders in the decision-making process in setting priorities, coordinating and monitoring the external assistance for COVID-19. The Coordination Centre is the only authority that can request external assistance from development partners aimed at eliminating the consequences of COVID-19.

## (2) Information presented by the Coordination Centre:

No information on the activity, meetings, members, decisions, recommendations of the Coordination Center is mentioned on the official websites of the Government and the State Chancellery.

The information available to the public is limited to a few interviews. Thus, on April 8, 2020 when the initiative to create this platform was presented, the Prime Minister Ion Chicu mentioned that the Government received “hundreds of addresses from local public authorities, institutions and other entities to receive humanitarian aid”. On 26 May 2020, Adrian Ermurachi, Deputy Secretary

General of the Government of the Republic of Moldova, reported that the Center met several times during this period.

# III. Statistical data on the social situation caused by the pandemic crisis

Public Opinion Barometer (BOP) in October 2020 and February 2021 measured the degree of information of the population about COVID-19. The latest survey shows a 3% increase in the number of those who believe it is a real virus (from 68% in October 2020 to 71% in February 2021) and, respectively, an 8% decrease in those who consider it to be a myth (from 26% to 18%).

At the same time, the BOP shows the degree of satisfaction of the population regarding the way in which the authorities of the Republic of Moldova handled things in relation to the COVID-19 pandemic. In February, the number of those who rated it bad and very bad (from 45% to 57%) and good and very good (from 16% to 32%) increased.

Survey data show a higher degree of dissatisfaction among the younger population. In October 2020, almost half of respondents aged 18-44 years were of the opinion that the authorities performed poor and very poor, while 36% of the respondents over 60 years old gave the same negative assessment. In February 2021 the number of dissatisfied respondents aged 18-44 years increased to 60%. At the same time, the level of dissatisfaction grew up to 50% among the respondents over 60 years old. The increased number of those who appreciated well the authorities' crisis management comes from the respondents aged 45-59 years.

According to the POB of February 2021, the respondents are very concerned about poverty - 51% (compared to 40% in October 2020), prices - 48% (compared to 46% in October 2020), unemployment - 42% (compared to 34% in October 2020).

data from the National Bureau of Statistics (NBS) reveal that the average number of

employees in the fourth Quarter of 2020 compared to the fourth Quarter of 2019 decreased by 1.8%. The average number of employees decreased in most economic activities.

## **The most significant decrease was recorded in:**

- a. Accommodation and public catering activities - by 24.5%;
- b. Transportation and storage - by 7.4%;
- c. Administrative and support activities and manufacturing industry - by 6.2% each.

The research results "The influence of the COVID-19 pandemic on the household" in the third Quarter of 2020 conducted by the NBS indicate that only around 15% of households mentioned that they had no financial difficulties. For the rest of the households, the main measures to overcome the crisis due to financial difficulties caused by the pandemic are to reduce spending on food – in the case of 12.3% of households with affirmative answers, and to use savings – 14.1%. Also, about 3% of households mentioned partial payment or non-payment for utilities, and 2.6% requested financial aid.



# Conclusions

1. The legislation of the Republic of Moldova stipulates two ways of introducing humanitarian aid into the country: the external donor sends supplies to the State in a centralized manner or directly to the recipients. Information on humanitarian aid provided during the pandemic by external partners directly is presented by MHLSP exhaustively. However, in the case of external humanitarian aid received in a centralized manner, it is necessary to show the final recipient of each individual donation.
2. The information on external donations is published by MHLSP in Excel format which delays the analysis and retrieval of official data.
3. Although at the beginning of the pandemic MHLSP promised to provide information on external assistance weekly, the last references to centralized assistance on the official website are as of January 11, 2021, and on direct assistance - December 2020<sup>4</sup>.
4. The official website of the MHLSP provides access to official data, statistics and decisions taken in the context of pandemic management from a social point of view. However, the MSMPS systemic assessment of the needs of healthcare institutions during the pandemic period based on which decisions are made as to where and how much of the external aid provided centrally is being redirected, are not made public.
5. In most cases the information of public interest related to the fight against COVID - 19 is not translated into Russian language on the webpage of the MHLSP.
6. Official information on the activity, decisions and recommendations of the External Assistance Coordination Centre for the elimination of the consequences of the COVID-19 pandemic is missing.
7. The pandemic crisis has disproportionately affected vulnerable groups. Poor households experienced great losses in terms of jobs. Households run by older persons expressed the highest level of food concern in all vulnerable groups. The share of those who lost their jobs is bigger among people over 60 years old. Returned migrants recorded the highest level of lost jobs in all groups. Vulnerable women had the lowest average income per family member among all vulnerable groups. There is evidence of an increase in domestic violence. Young people who are not in employment, education or training are at greater risk of social exclusion than the rest of the population.
8. Disproportional impact of the pandemic has underlined the problem of wage inequalities. Wages increased more for employees with already high salaries and less for those who earn less.

<sup>4</sup> Data as of March 31, 2021. On 30 June 2021 the last references to centralized and direct assistance refer to May 2021, i.e. during the last period the MSMPS has been more active in the update of the information.

# Recommendations

1. Changing the way how the MHLSP presents external assistance so the entire trajectory of each humanitarian aid received in a centralized manner is seen - starting with donor, storage at the warehouse and delivery to the end user - beneficiary.
2. Changing the methods of presenting the data on external assistance during the pandemic by the MHLSP by replacing the Excel table with an interactive map and accessible charts.
3. Information on humanitarian aid should be updated more often and systematically by the MHLSP.
4. Publication of periodic assessment of available stocks and needs of personal protective equipment, medicines, medical devices, biodegradable and laboratory supplies by MHLSP, which can be used to decide where and what quantity is provided as centralized external humanitarian aid.
5. Ensure proper functioning of the webpage of the MHLSP in Russian language, especially the Section dedicated to "COVID-19".
6. Ensure transparency of the activity, decisions and recommendations of the Foreign Assistance Coordination Centre with a view to the elimination of the consequences of the COVID-19 pandemic.
7. The development, discussion and implementation by the government of policies aimed at: Increasing the resilience of households; increasing social benefits and extending social protection to cover vulnerable groups currently not receiving social payments; protecting the labor rights of the elderly; digital inclusion of the elderly; and the digitalization of healthcare; professional re-profiling for young people who are not in employment, education or training and returning migrant workers; response program to domestic violence.
8. The non-acceptance of the reduction of rights and guarantees provided for employees and the modification of the Labor Code to the detriment of employees, raising the minimum wage and collective bargaining.