COVID-19 IMPACT ON THE REMITTANCES

Assessment of coping mechanisms of families with children from the Republic of Moldova
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This assessment of the impact of coronavirus disease (COVID-19) on remittances and coping mechanisms of families with children in the Republic of Moldova was conducted and drafted by Rodolphe Baudeau, Alizée Boutard and Anastasia Durbailova of ALTAI Consulting, under the supervision of and with contributions from Xavier R. Sire, Social and Economic Policy Specialist at the United Nations Children’s Fund (UNICEF) Moldova. It also benefited from revisions and inputs from several other colleagues: Elena Laur, Child Rights Monitoring Specialist, and Ilija Talev, Deputy Representative, at UNICEF Moldova; and Pamela Dale, Regional Adviser on Social Policy at UNICEF ECARO. The researchers are also grateful for the technical expertise provided by Ghenadie Crețu, Manager of Migration and Development Programme at the International Organization for Migration (IOM) Moldova; Andrea Cuzyova, Deputy Resident Representative at the United Nations Development Programme (UNDP) Moldova and Lars Johann Lonnback, IOM Moldova Chief of Mission. Their inputs were particularly valuable to the conceptualization of this assessment.

In addition to the appreciation owed to research participants, sincere thanks go to the staff members of the National Bureau of Statistics of the Republic of Moldova, in particular Aurelia Spătaru, Deputy General Director. Their willingness to share information, including detailed quantitative data, as well as their openness to sharing impressions, are what made this work possible. Thanks also to Markus MacGill and his colleagues at Green Ink for editing the report for clarity and consistency.
<table>
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<th>Definition</th>
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<tr>
<td>Disposable income</td>
<td>Consistent with the definition used by the National Bureau of Statistics of the Republic of Moldova, disposable income is the total cash and in-kind income received from salaried activity and self-employment, various social benefits, sales of agricultural production from plots, property income, and other current transfers (including goods received as gifts and gratuities).</td>
</tr>
<tr>
<td>Eastern Europe</td>
<td>In this report, Eastern Europe comprises Belarus, Bulgaria, the Czech Republic, Poland, Romania and Ukraine.</td>
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<tr>
<td>Household</td>
<td>A group of people, not necessarily related, living at the same address with a common budget.</td>
</tr>
<tr>
<td>Household head</td>
<td>The person with the largest income. In cases where it is difficult to determine the contribution of each member to the household budget, the household head is the person recognized as such by other members of the household.</td>
</tr>
<tr>
<td>International migrant/long-term or permanent migration</td>
<td>Refers to a change of country of residence for a duration of 12 months or more.</td>
</tr>
<tr>
<td>Non-official income</td>
<td>The portion of a household’s total income deriving from side-jobs, undeclared work, sale of agricultural/homemade products (if not the main income source), and other sources.</td>
</tr>
<tr>
<td>Place of usual residence</td>
<td>The place where the person has lived for most of the past 12 months, not including temporary absences for holidays or work assignments. Similar to the proxy “at least nine months during the past year”.</td>
</tr>
<tr>
<td>Poverty line</td>
<td>The poverty line is set once by the National Bureau of Statistics of the Republic of Moldova and adjusted every year based on the value of the Consumer Price Index. This report uses the absolute poverty line as computed by the National Bureau of Statistics for 2016, adjusted for the year 2018 (i.e. MDL1,998.4 per adult per month). Unless otherwise mentioned, “below poverty line” means living below the poverty line before the COVID19 crisis.</td>
</tr>
<tr>
<td>Re-migrating returned migrant</td>
<td>A person who has left the Republic of Moldova after a return to the country of more than three months following an absence of longer than three months (or in case of short-term migration, at least one month).</td>
</tr>
<tr>
<td>Returning migrant</td>
<td>A person who has returned to the Republic of Moldova after spending at least three months abroad (or more than one month in the case of short-term migration), with a pattern of one to three months of maximum stay abroad.</td>
</tr>
<tr>
<td>Short-term or temporary migration/migrant</td>
<td>A change of country of residence for at least three months but less than a year, except in cases where the movement to that country is for the purposes of recreation, holiday, visits to friends or relatives, business, medical treatment or religious pilgrimages.</td>
</tr>
<tr>
<td>Income from social payments</td>
<td>The portion of household total income that includes pensions, disability and family allowance, unemployment benefit, allowances for children and other social allowances.</td>
</tr>
<tr>
<td>Socioeconomic status of the household</td>
<td>Based on the main source of income of the household head. Different categories of socioeconomic status exist:</td>
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<tr>
<td></td>
<td>• Farmers – households whose heads get their main source of income from individual agricultural activity</td>
</tr>
<tr>
<td></td>
<td>• Employees in agricultural sector – households whose heads have their main source of income from remunerated agricultural activity</td>
</tr>
<tr>
<td></td>
<td>• Employees in non-agricultural sector – households whose heads get their main source of income from remunerated non-agricultural activity</td>
</tr>
<tr>
<td></td>
<td>• Self-employers – households whose heads have their own business in non-agricultural sector as main source of income (trade, business, handicrafts, etc.)</td>
</tr>
<tr>
<td></td>
<td>• Pensioners – households whose heads have pensions as their main source of income</td>
</tr>
<tr>
<td></td>
<td>• Others – other households whose heads have their main source from various social benefits, property income, remittances and other incomes.</td>
</tr>
<tr>
<td>Usual resident</td>
<td>A person having their usual residence in the country at a reference time.</td>
</tr>
<tr>
<td>Western Europe</td>
<td>In this report, western Europe is countries of the European Union located in the western part of Europe. It includes: Austria, Belgium, France, Germany, Greece, Italy, Ireland, Portugal, Spain, the United Kingdom of Great Britain and Northern Ireland, and so on. Switzerland is also included in this category.</td>
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</table>
Executive summary

In the face of the coronavirus disease (COVID19) pandemic and its resulting economic crisis, the United Nations in the Republic of Moldova set up a task force under the guidance of the United Nations Development Programme (UNDP) to coordinate the United Nations response. Several sets of research have been commissioned to assess the socioeconomic consequences on the population and provide recommendations to the central and local authorities to mitigate the impact. This research is the contribution of UNICEF and aims to assess the impact of the crisis specifically on families with children. Given the strong reliance of the Moldovan economy on remittances (US$1.9 billion remitted yearly, equivalent to 16 per cent of the country’s GDP), this research is focused on families with children receiving remittances.

The research has five main objectives:

1. Measuring the impact of COVID19 on the level of remittances (monetary and non-monetary)
2. Profiling receiving households with children that depend to a large extent on remittances for their income (location, family structure, demography, etc.)
3. Understanding households’ most commonly adopted coping mechanisms to deal with the impact of reduced income and/or a returning family member
4. Understanding how these coping mechanisms affect children’s rights and well-being
5. Providing recommendations on sector-specific policy options for decision-makers at all levels to mitigate the negative impact of COVID19 on the most vulnerable families with children (including looking at international best practices)

A mixed-methods research approach was used as follows.

- Desk review to collect macro-level data on migration, remittances volumes, the profile of receiving households, the characteristics of households with children, and so on, and to identify data gaps. The documents reviewed include reports and databases from the National Bureau of Statistics of the Republic of Moldova, the International Organization for Migration (IOM), UNICEF, the United Nations Development Programme (UNDP), the World Bank and the International Labour Organization.
- Key informant interviews with representatives of UNICEF, the IOM, the UNDP, the National Bureau of Statistics, local public authorities, and so on, to get a better understanding of the context, to gather expectations related to the project, to collect data for the desk review, to align research questions, methodologies and definitions, and to get insights on the impact of COVID19 on Moldovan families.
- Quantitative survey among 1,015 households with children to fill the data gaps and to collect data on the impact of COVID19 on these households and on the coping mechanisms adopted. Two sub-samples allow for comparison between families with children receiving remittances (501 households) and those not receiving remittances (514).
- Four focus group discussions among families with children in urban areas (two groups) and rural areas (two groups) to get a more detailed understanding of the coping mechanisms adopted and of the impact of the COVID19 crisis on children in the Republic of Moldova and explain the quantitative data collected.

The research focuses on the right bank of the Dniester (Nistru) river. The following are the key findings:

- Thirty-two per cent of households in Moldova have children and these households tend to be poorer (with a quarter less disposable income per capita on average than households without children). Among them, households living in rural areas, households with multiple children and households headed by women are the poorest.
- Wages and salaries represent only about half of the income of households with children. The main alternative source of income is remittances, which represent 20 per cent of families’ incomes on average and 28 per cent in rural areas.
- In 2019, Moldovan migrants remitted home US$1.9 billion, equivalent to 16 per cent of the country’s GDP. Twenty-three per cent of households with children have at least one household member abroad at a given time, and in a given year, 37 per cent of households with children have at least one member who went abroad to work. Migration has both positive effects (households with migrants have on average 7 per cent more disposable income per capita than households without migrants) and negative effects (children growing up without their parents tend to suffer emotionally and are more likely to become victims of abuse or to adopt risky behaviours).
- All population segments have been impacted by the COVID19 crisis. Moldovan households with children have lost 15 per cent of their income on average. All population segments (households receiving and not receiving remittances, living in urban and rural areas, with a single child and multiple children, female-headed and male-headed, etc.) have been affected in similar proportions.
- Households receiving remittances have had a slightly higher fall in household income than non-receiving households (a 17 per cent fall compared with 13 per cent), as remittances have fallen by 25 per cent on average. They are, however, more resilient than non-receiving households. The poverty rate among households not receiving remittances has increased by 8 percentage points to 33 per cent, compared with the rate for non-receiving households going up by 6 percentage points to 27 per cent.
- The situation is very delicate for households whose migrant workers lost their jobs or had to return and who have therefore lost their main source of income. Twenty-five per cent of households with children have had a fall in remittances of more than 50 per cent, which has a very significant impact for households whose income is on average 62 per cent composed of remittances.
- Local economic decline has been the main effect on households not receiving remittances (some have lost their jobs, could not work during the lockdown, work in a sector that has been heavily affected, etc.). This has a strong impact on these households, whose income is 87 per cent composed of salaries.
- Moldovan households with children have faced an increase in expenses in addition to the falls in income. Households with children have had to spend more on food, utilities, health care, computer equipment, and so on.
- As the COVID19 crisis has impacted all population segments in similar proportions, those that were the most vulnerable before the pandemic continue to be the most in need – rural households and households with multiple children have been particularly affected. Children in general and women have also been particularly affected, with higher cases of child neglect and domestic violence in general reported by local public authorities.
- To cope with the crisis, households with children have cut down on expenses, resulting in a lowering of their living standards. Some
There is a strong dissatisfaction with access to education during the pandemic. Despite efforts from schools, teachers and pupils, online education remains far from satisfactory. The quality of lessons is rated as low by parents and caregivers, and not all subjects are being taught online. Some families have not had enough devices for all their children to study. School closures have also prevented parents from working.

Thirty-seven per cent of households with children have had less access to health services. Many hospitals have been overwhelmed, and households are afraid that sending children to the doctors or hospitals will risk infection.

Local public authorities are fearing longer-term impacts on children’s health as a knock-on effect from prioritizing services to COVID19.

Recommendations for the central and local authorities are to limit the impact of the crisis on families’ incomes and budgets, and to guarantee children’s rights (access to education and health in particular).

The government should put in place the following series of measures:

- Support Moldovan migrants who are the main source of income for many families (protecting them abroad so that they do not lose their jobs, facilitating travel in and out of the Republic of Moldova as long as the health situation allows, providing specific support to returning migrants, whose families are in dire need, etc.).
- Support households not receiving remittances, by maintaining jobs and salaries in the Republic of Moldova (through support to local businesses such as tax, social contributions and credit payments deferrals, preferential-interest loans and state guarantees, etc.).
- Limit the increase in expenses for food, health and utilities, by ensuring that school meal budgets do not fall back on parents, health products and services do not increase in price too much, access to utilities is not cut even if households pay late, and so on.
- Provide extra support to the most vulnerable (rural households, households with multiple children, etc.) by offering a form of pandemic compensation through the Ajutor Social programme.
- Avoid school closure as much as possible. When online lessons are necessary, ensure lessons are available at different times and on different platforms to allow a maximum number of children to follow them.
- Launch awareness campaigns to get children back to health facilities: reassure parents and caregivers about sending children to health facilities and inform them of the risks of not getting vaccinations and treatments.
- Launch an awareness campaign and train the police and social workers on domestic violence and child neglect, to ensure cases are reported and adequately cared for by the authorities.

Introduction

Context

The Republic of Moldova has been heavily impacted by the coronavirus disease (COVID19) pandemic and its resulting economic consequences. The United Nations in the Republic of Moldova set up a task force under the guidance of the United Nations Development Programme (UNDP) to coordinate the United Nations response to the crisis. This research is the contribution of the United Nations Children’s Fund (UNICEF) and part of a set of research initiatives launched by the United Nations task force to understand the socioeconomic impact of COVID19 on families with children in the Republic of Moldova.

In the past 6 years, the Republic of Moldova has lost 8 per cent of its usually resident population. Lack of job opportunities, low wages, deficient public services and political instability, coupled with freedom of movement with the Russian Federation and the European Union, pushed many Moldovans to emigrate with the hope of lifting themselves and their families out of poverty. In 2019, Moldovan migrants sent home US$1.9 billion in remittances, equivalent to 16 per cent of the country’s GDP. For families with children, remittances are often the largest source of income, representing on average 20 per cent of their disposable income.

Research by International Organization for Migration (IOM) has highlighted the vulnerability of Moldovan migrants in the face of the COVID19 crisis, and their difficulties sustaining their families with regular remittances to the Republic of Moldova. UNICEF, in coordination with the IOM, therefore decided to focus the present research on gaining an understanding of this impact of COVID19 on remittances for vulnerable families – and the coping mechanisms adopted by remittance-receiving households with children in the Republic of Moldova.

Objectives

The overall purpose of the assignment was to assess the impact of the reduced flow of remittances on families with children in the areas of health, education, nutrition and other child-related social services, and to drive the development of an equity-focused and gender-sensitive midterm mitigation plan. The specific research aims were to:

- Measure the impact of COVID19 on the level of remittances (monetary and non-monetary).
- Profile households with children (location, family structure, demography, etc.) that depend to a large extent on remittances for their income.
- Understand the coping mechanisms most commonly adopted by these households to deal with the impact of reduced income and/or a returning family member.
- Understand how these coping mechanisms affect children’s rights and well-being.
- Provide recommendations on sector-specific policy options (including international best practices) for decision-makers at all levels to mitigate the negative impact of COVID19 on the most vulnerable families with children.

This research complements a broader assessment of the impact of COVID19 in the Republic of Moldova conducted by Pricewaterhouse-Coopers under the guidance of the UNDP, which aims to support the government in the design of a mitigation plan for the entire population.
Methodology
A mixed-methods research methodology was used for the research, incorporating:

- Desk review
- Key informant interviews
- Quantitative survey among households with children
- Focus group discussions among families with children

Desk review
The desk review aimed to collect macro-level data on migration, remittance volumes, the profile of receiving households, the characteristics of households with children, and so on, and to identify data gaps. This report focuses on the main gaps identified, which pertained to the disaggregation of data within households with children.

The documents reviewed included publicly available reports and databases, press articles, and documents and databases shared by stakeholders during the key informant interviews. A bibliography of the main documents and databases reviewed is given by Appendix 1.

Key informant interviews
The research undertook key informant interviews with representatives of:

- UNICEF in Chișinău
- IOM in Chișinău
- UNDP in Chișinău
- The National Bureau of Statistics of the Republic of Moldova
- Local public authorities:
  3. Department of Social Assistance and Family Protection in Cimișlia.

The objective of these interviews was to get a better understanding of the context and expectations for the research, to gather relevant data for the desk review, to align with partners on the research questions, methodology and definitions, and to get stakeholders’ perspectives on the socioeconomic impact of the COVID19 crisis on households in Moldova.

Quantitative survey
A nationally representative phone survey was performed among 1,000 households with children. It used two sub-samples of 500 households: one of households with children receiving remittances and one with households not receiving remittances (Figure 1).

The rationale for splitting the sample in this survey design was:

- To generate robust evidence for the three different population segments of interest (random sampling would have led to a smaller sample size for households with children receiving remittances).

Note that, due to the survey design, institutionalized children (e.g. children living in orphanages) were not a subject of the study and were not included in the survey.

The objective of the quantitative survey was to fill the data gaps and to collect data on the impact of COVID19 on households with children, and on the coping mechanisms they adopted. The structure of the quantitative questionnaire is shown in Table 1.

Depending on the preferred language, the questionnaire was translated into Moldovan, Romanian or Russian and administered over the phone.

Respondents were recruited using a nationally representative sampling frame of Moldovan households. Filter questions were used to narrow the respondents down to households with children. Interviews lasted 10 to 20 minutes on average.

The database was weighted to enable an analysis of all households with children (to compensate for the two sub-segment quotas). The weighting used reflected the 39 per cent incidence rate of randomly called households with children who received remittances. After a comparison of the socio-demographic characteristics of the sample with the National Bureau of Statistics of the Republic of Moldova household budget data (2018), the research team concluded that no bias had been introduced during the random calling, and so they applied no further weighting.

Table 1. Survey structure
Focus group discussions

Four focus group discussions (two in urban areas and two in rural areas) were organized with families with children (Figure 2) – to get a more detailed understanding of the coping mechanisms adopted and of the impact of the COVID19 crisis on children.

To protect respondents’ and research teams’ health, focus group discussions were organized online, via video calls. They were conducted with (co-) heads of households with children, to ensure a certain mix of age, gender, socioeconomic profile, number of children and reliance on remittances, thus collecting a diversity of insights. Towards this effort, a quota of a minimum of two to three low-income participants over the eight total focus group discussion participants was applied. Low-income participants were defined by asking a question about their purchasing power:

Which of the following statements best describes the financial status of your family?

1. We have enough money only for food
2. We have enough money for food, sometimes to buy some clothes
3. We have enough money to buy food and clothing, but for more expensive purchases (for example, television or notebook computer), we have to save up
4. We have enough money to buy a television or notebook computer, but have to save up in case we plan to purchase a car
5. We have enough money, and we can afford everything, without saving up or giving up anything

People selecting one of the first two statements were classified as low-income, while those selecting the third statement were classed as middle-income and people choosing one of the last two statements were deemed to be high-income.

Each focus group discussion took place with eight participants and lasted on average between 75 and 90 minutes.

Focus group discussions were held in mostly in Romanian or Moldovan, with Russian being used occasionally as required by some participants. The structure of the focus group discussions is shown in Table 2.

Statistical note

Various sources have been leveraged in this report, which explains some of the differences in the data featured in the figures and tables. Some survey questions triggered a sizeable number of non-answers. This might lead to slight discrepancies in the numbers presented. For example, an overall average is provided on all respondents (N=1,015), while averages by male and female heads of household are computed only for households who declared the gender of their head of household (N=672 for male heads of household and N=246 for female heads of household). The overall average might therefore be 62 per cent, while the average for male heads of household is 58 per cent and for female, 60 per cent.
Households with children in Moldova tend to be much poorer than those who do not have children, with on average 25 per cent less disposable income (MDL2,024 MDL per capita a month for households with children versus MDL2,711 for those without children). Among households with children, those living in rural areas and with multiple children are the poorest. Rural households with children have on average 31 per cent less disposable income than their rural counterparts, and households with 3 or more children have 40 per cent less than households with 1 child only. The main source of income for households with children in the Republic of Moldova is salaries, but these represent only about half (52 per cent) of the disposable income. Low wages and salaries in the country make it difficult for families to ensure a living above

1.1 Profiling of families with children

Since the early 1990s, the Republic of Moldova has experienced a continual demographic decline. The country has one of the lowest fertility rates in the world, with 1.26 children per woman. This compares with a fertility rate of 1.76 in Romania and a world average of 2.4. As a result, households in the Republic of Moldova are relatively small: 2.2 people on average, including 0.4 children.

Thirty-two per cent of households in the Republic of Moldova have children under 18 years of age, and over half of households (53 per cent) have only one child. Most of the households with children (55 per cent) live in rural areas. These rural households with children tend to have more children than households in cities (52 per cent have more than one child, versus 40 per cent in urban areas).

The socioeconomic statuses of households (e.g. the main source of income of the head of the household) reveal differences in household composition. Self-employed households (those with entrepreneurs), for instance, are by far the most likely to have children, and to have more than one child, compared with farmers or employees in the agricultural and non-agricultural sectors.
substance, and many families depend on complementary sources of income. As seen in Figure 4, remittances from abroad are the main alternative and account on average for 20 per cent of the disposable income of families with children, followed by social benefits (9 per cent), individual farming activity (8 per cent) and individual non-farming activity (7 per cent). Social benefits account for only a small share of the disposable income of families with children (9 per cent) while it represents more than a quarter (27 per cent) for households without children, many of which are pensioners. For households with children, social benefits are mostly composed of pensions (43 per cent), child benefits (24 per cent), social aid (13 per cent) and other benefits (19 per cent).

The sources of income of households with children vary depending on their area of residence and number of children. Rural households with children, for example, get only 37 per cent of their disposable income from salary-based work, compared with 67 per cent for their urban counterparts. Remittances play an important role for rural households, representing 28 per cent of their disposable income versus 12 per cent in urban areas. Similar patterns can be observed for households with multiple children: for instance, households with 3 or more children get 32 per cent of their disposable income from salary-based work (versus 57 per cent for households with a single child), while remittances account for 26 per cent of their income (versus 18 per cent for household with a single child).

In addition to the urban–rural divide and the number of children, ethnicity and disability also play a role: Roma children and children with disabilities, for instance, are disproportionately poorer than children from other ethnicities and non-disabled children.

Food represents by far the main household expenditure of households with children in the Republic of Moldova, accounting for 43 per cent, a proportion similar to the one of households without children (see Figure 5). There are differences, however, when looking at other expenses: households with children tend to spend proportionally more on clothing and footwear (13 per cent, compared with 9 per cent for households without children), but less on household maintenance (15 per cent for households with children versus 21 per cent for those without children).

Households with children have different consumption expenditures depending on area of residence and the number of children. Rural households and households with 3 or more children tend to spend a much higher proportion of their income on food (47 per cent and 51 per cent, respectively, compared with 40 per cent for urban households and 41 per cent for households with 1 child only – see Figure 6). These households spending greater proportions on food are, however, poorer, so they spend less on food in absolute value per capita than urban households and households with 1 child only (MDL838 per capita a month in rural areas versus MDL1,033 per capita a month in urban areas, and MDL771 per capita a month for households with 3 or more children versus MDL986 per capita a month for households with 1 child only).

A shown by Figure 7, households with children led by women are more vulnerable than those led by men: they are more likely to be below the poverty line (28 per cent versus 21 per cent) and to rely on remittances (4 per cent receive remittances versus 34 per cent for households with children led by men).
1.2 Focus on remittance-receiving families with children

The Republic of Moldova has experienced a strong emigration trend in recent decades, driven mostly by low domestic wages, and freedom of movement with the Russian Federation and the European Union.

“It is very difficult to find a job in our village, and salaries are very small. So [our husband working abroad] is the only solution for us. It would be ideal if he found a good job in our region, at least for 300 to 400 euros. But this is impossible.”

Female, 43-year-old, with husband recently returning from the Russian Federation, where he was working in construction, 2 children (including 1 under 18 years of age), low-income, rural

In the 6 years from 2014 to 2020, the Republic of Moldova lost 8 per cent of its usually resident population, falling steadily from nearly 2.9 million in 2014 to just over 2.6 million in 2020 (Figure 8).

In 2019, the Moldovan diaspora remitted US$1.9 billion, equivalent to 16 per cent of the country’s GDP. Without these remittances, it is estimated that 100,000 Moldovan households would have fallen into poverty.

According to the World Bank, there are over 1 million Moldovan migrants in the world. The 4 main host countries are the Russian Federation (29 per cent of all Moldovan migrants in the world), Italy (17 per cent), Ukraine (15 per cent) and Romania (15 per cent). The remaining 24 per cent are in the United States of America (4 per cent) and Germany (3 per cent), followed by Portugal, Uzbekistan and Spain (2 per cent each). Other countries host less than 2 per cent of the total number of Moldovan migrants. Clear gender patterns exist when looking at the countries of migration of Moldovan men and women: men tend to go to the Russian Federation, where they represent 77 per cent of all Moldovan migrants, while women tend to go to Italy (73 per cent of all Moldovan migrants in the country).

Moldovan migrants remit an average of US$1,601 per person per year, or around US$133 a month (before COVID-19). There are large disparities, however, depending on the country of migration. Moldovan migrants in the United States, for instance, remit an average US$2,392 per person per year, compared with only US$618 for Moldovan migrants in Romania. As a general rule, migrants in North America and western Europe remit the highest amounts (Germany: US$2,175 per person per year, Portugal: US$1,992, Spain: US$1,835, Italy: US$1,817), followed by the Russian Federation (US$1,810 per person per year) and eastern Europe (Ukraine: US$1,576 per person per year). As a result, the main origin countries of remittances sent to the Republic of Moldova are the Russian Federation (33 per cent of the total value), Italy (20 per cent), Ukraine (15 per cent), the United States (6 per cent) and Romania (6 per cent).
Table 3. Migration patterns of adults in households with children in the Republic of Moldova

<table>
<thead>
<tr>
<th>Adult migrants in the household</th>
<th>Households with children</th>
<th>Households with children in urban areas</th>
<th>Households with children in rural areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of households with an adult member currently abroad</td>
<td>23%</td>
<td>19%</td>
<td>28%</td>
</tr>
<tr>
<td>Percentage of households with an adult who has been abroad to work at least 1 month in the past 12 months (but who is currently in the Republic of Moldova)</td>
<td>14%</td>
<td>9%</td>
<td>21%</td>
</tr>
<tr>
<td>Percentage of total households with an adult who migrated in the past 12 months</td>
<td>37%</td>
<td>28%</td>
<td>49%</td>
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</table>

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<thead>
<tr>
<th>Gender of migrants</th>
<th>Households with children</th>
<th>Households with children in urban areas</th>
<th>Households with children in rural areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of households with at least 1 male migrant</td>
<td>69%</td>
<td>72%</td>
<td>66%</td>
</tr>
<tr>
<td>Percentage of households with migrants with at least 1 female migrant</td>
<td>51%</td>
<td>52%</td>
<td>49%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Countries of migration</th>
<th>Households with children</th>
<th>Households with children in urban areas</th>
<th>Households with children in rural areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Italy</td>
<td>20%</td>
<td>19%</td>
<td>22%</td>
</tr>
<tr>
<td>Russian Federation</td>
<td>19%</td>
<td>23%</td>
<td>16%</td>
</tr>
<tr>
<td>Germany</td>
<td>13%</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td>France</td>
<td>12%</td>
<td>16%</td>
<td>10%</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>10%</td>
<td>11%</td>
<td>10%</td>
</tr>
<tr>
<td>Israel</td>
<td>7%</td>
<td>5%</td>
<td>8%</td>
</tr>
<tr>
<td>Romania</td>
<td>4%</td>
<td>5%</td>
<td>8%</td>
</tr>
<tr>
<td>Poland</td>
<td>4%</td>
<td>3%</td>
<td>8%</td>
</tr>
<tr>
<td>Other</td>
<td>15%</td>
<td>14%</td>
<td>17%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Livelihoods abroad (for migrants currently abroad)</th>
<th>Households with children</th>
<th>Households with children in urban areas</th>
<th>Households with children in rural areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Construction/home care</td>
<td>64%</td>
<td>66%</td>
<td>63%</td>
</tr>
<tr>
<td>Hotels, restaurants and catering-related professions/trades</td>
<td>15%</td>
<td>18%</td>
<td>13%</td>
</tr>
<tr>
<td>Transport and logistics</td>
<td>11%</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>Highly skilled job</td>
<td>11%</td>
<td>11%</td>
<td>11%</td>
</tr>
<tr>
<td>Light industry</td>
<td>9%</td>
<td>6%</td>
<td>11%</td>
</tr>
<tr>
<td>Agriculture</td>
<td>3%</td>
<td>4%</td>
<td>3%</td>
</tr>
<tr>
<td>Other</td>
<td>6%</td>
<td>7%</td>
<td>4%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Relationship with children (Percentage of households with migrant with a... abroad)</th>
<th>Households with children</th>
<th>Households with children in urban areas</th>
<th>Households with children in rural areas</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent</td>
<td>42%</td>
<td>41%</td>
<td>43%</td>
</tr>
<tr>
<td>Grandparent</td>
<td>19%</td>
<td>23%</td>
<td>17%</td>
</tr>
<tr>
<td>Uncle/aunt</td>
<td>30%</td>
<td>43%</td>
<td>33%</td>
</tr>
<tr>
<td>Sibling</td>
<td>10%</td>
<td>5%</td>
<td>14%</td>
</tr>
<tr>
<td>Other</td>
<td>3%</td>
<td>4%</td>
<td>3%</td>
</tr>
</tbody>
</table>

Figure 9. Main host countries for Moldovan migrants and volumes of remittances
Source: The World Bank
Note: Data on the number of migrants in host countries vary by sources used and the definition of “migrant”. To enable comparison with remittance levels, bilateral data from the World Bank for 2017 were used.

Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N=290 (heads of household with children); N=128 (urban); N=102 (rural) – households with migrant members only; excluding “do not know” answers and participants refusing to answer. Some households have several migrant workers. Some households receiving remittances do not necessarily have a migrant member abroad (remittances can originate from short-term migrations or be received from other friends or relatives not considered part of the household).
Moldovan migrants working abroad mostly have low-skilled jobs. Men mostly work in construction and women in home care (nannying, cleaning, caregiving for older people, etc.). Two other characteristics of Moldovan migration include the high number of women migrants and short-term migration (less than three months spent abroad). The short-term migrations are mostly driven by the right of Moldovans to travel visa-free to European Union countries for durations under three months.

The survey for this report – which focused on households with children – has found migration patterns generally similar to those of the entire population, although with a few differences. Migrants belonging to households with children tend to migrate to Italy (20 per cent), the Russian Federation (19 per cent), Germany (13 per cent), France (12 per cent) and the United Kingdom of Great Britain and Northern Ireland (10 per cent). The higher representation of European Union countries compared with former Soviet countries could be explained by the profile of the migrants belonging to households with children. They tend to be younger, and young people are more likely to migrate in the European Union than their elders (who tend to favour Russian-speaking countries).

Similarly to the national pattern, there is a high proportion of females among migrants belonging to households with children. In every two households with children and migrant workers, there is at least one female migrant. The short-term migration pattern is also seen. The survey has found that, overall, 23 per cent of households with children have a household member abroad at any given time, and that 37 per cent of households with children have had at least one member abroad for work in the past 12 months, a number that can be explained by short-term migrations.

As observed at the national level (i.e., all households), the country of migration of the migrant worker has an impact on the amount of remittances sent home (Figure 10). Although the sample sizes of the quantitative survey with households with children are small for disaggregation by the country of migration and the sector of activity of the migrant, some main trends – aligned with what is observed at the national level – are emerging. Households with children with migrant workers in western Europe tend to receive more than those with migrant workers in the Russian Federation for instance. As a result, households with children receiving remittances from the Russian Federation have more income from other sources than those with migrant workers in western Europe. The sector of activity in which the migrant worker is working also has an impact. Households with children whose migrant workers work in construction or home care tend to send the smallest amounts.

Overall in the survey, 39 per cent of households with children in the Republic of Moldova receive remittances, monetary or non-monetary, from abroad. Emigration and remittances greatly impact Moldovan children. On the negative side, 37 per cent of children in the Republic of Moldova do not live with both their parents – in 26 per cent of cases because parents emigrated abroad. Children in rural areas are particularly affected, with 29 per cent of them having at least one parent abroad. When one of the two parents is abroad, children live in households where the other parent (76 per cent) or a grandparent (38 per cent) is present. When both parents are abroad, children live in households where a grandparent is present (65 per cent) but sometimes also an adult sibling (31 per cent) or an uncle or aunt (25 per cent).

Children deprived of their parents face numerous difficulties, which tend to be reinforced when both parents have migrated.

- They tend to suffer from emotional and social distress.
- They are more likely to become victims of violence and abuse.
- The lack of parental references impacts their overall psychological development.
- They are more likely to adopt risky behaviours (e.g. drugs/alcohol abuse) and to break the law when growing up, because of a lack of orientation and supervision.
- In some households, and especially when the mother has migrated, children are required to take on more responsibilities and to participate much more to household chores, leaving them with little time to play and to socialize with other children.
- For girls left behind by their mothers, the challenges discussing puberty and sexual reproductive health with their fathers are an additional difficulty.

\[\text{Figure 10. Monthly amount of remittances received (MDL)}\]

\[\text{Figure 11. Children living with their parents}\]

Sources: Arends, et al.; National Centre of Public Health of the Ministry of Health of the Republic of Moldova and UNICEF, and Yanovich
“The negative part is that children grow up without a father. We talk on Viber, but it is not enough.”
Female, 28 years of age, social worker, 2 children, low-income, urban

“In our community, it is common for children to have parents abroad. […] These children are more prone to psychological problems than other children – specially during adolescence, when they need to realize themselves. Often, these children exhibit risky behaviours. I noticed, for instance, children with high potential who adopted unhealthy and unproper habits.”

One of the heads of the Health, Social Protection and Education Departments, Balti

Figure 12.

Comparison of socio-demographic profile of households with children receiving and not receiving remittances / MDL = Moldovan leu
Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); excluding “do not know” answers and participants refusing to answer on some variables

<table>
<thead>
<tr>
<th>Household composition</th>
<th>Households with children receiving remittances</th>
<th>Households with children not receiving remittances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household members</td>
<td>3.9 household members</td>
<td>4 household members</td>
</tr>
<tr>
<td>Adults</td>
<td>2.2 adults</td>
<td>2.4 adults</td>
</tr>
<tr>
<td>Children</td>
<td>1.7 children</td>
<td>1.6 children</td>
</tr>
<tr>
<td>Urban</td>
<td>53%</td>
<td>42%</td>
</tr>
<tr>
<td>Rural</td>
<td>47%</td>
<td>58%</td>
</tr>
<tr>
<td>Area of residence</td>
<td>Average MDL 2,677</td>
<td>Average MDL 2,504</td>
</tr>
<tr>
<td>Households with children receiving remittances</td>
<td>Median MDL 2,000</td>
<td>Median MDL 1,880</td>
</tr>
<tr>
<td>Living below the poverty line</td>
<td>21%</td>
<td>25%</td>
</tr>
</tbody>
</table>

Figure 12.

Comparison of monthly income per capita (MDL) – households receiving and not receiving remittances
HH = heads of household; MDL = Moldovan leu
Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 309 to 315 (overall); N = 133 to 186 (urban); N = 129 to 176 (rural); N = 68 to 78 (female heads of household); N = 186 to 232 (male heads of household); N = 65 to 78 (below poverty line); N = 236 to 243 (above poverty line); excluding “do not know” answers and participants refusing to answer on some variables

On the positive side, children whose parents have migrated tend to live in wealthier households, thanks to the remittances sent by their migrant parents, which lift them out of poverty. Remittances allow for greater stability within the family, and support investment in children’s education and health care. It is estimated, for example, that without remittances, rural poverty would double.

“Children who receive remittances sometimes have more financial resources compared to colleagues whose parents work in the Republic of Moldova.”
Interviewee in the Directorate for the Protection of the Rights of the Child, Buiucani Sector

Figure 12 shows differences in the characteristics of households with children receiving and not receiving remittances. These categories of household had similar compositions in the survey – on average, they have just over two adults and just under two children, with a total number of household members of around four – but there are differences in the area of residence, household income per capita and income composition. Most households with children receiving remittances live in rural areas (53 per cent), while those not receiving remittances mostly live in urban areas (58 per cent). Households receiving remittances tend to be slightly better off than those not receiving remittances. If poverty is often the main reason for migration, once abroad, migrants are able to support their families with remittances, thereby lifting them out of poverty. As a result, the poverty rate among households receiving remittances – despite being more likely to live in the usually poor rural areas – is 21 per cent, compared with 25 per cent for households not receiving remittances. In terms of income composition, households receiving remittances heavily rely on them to
survive — they represent 62 per cent of the total household income on average. Conversely, households not receiving remittances mostly rely on salaries or wages to live (87 per cent of the total household income).

On average, households receiving remittances have monthly incomes per capita 7 per cent higher than those not receiving remittances (Figure 12). Receiving remittances has the strongest impact on household income for households with children in rural areas (who have on average 21 per cent more income per capita than those not receiving remittances) and for households headed by women (19 per cent more income per capita compared with households not receiving). Even in urban areas, where the average income per capita is already much higher than the overall level, remittances play a big role, increasing income by 13 per cent. When looking at the overall picture, remittances do not close the urban–rural divide: rural households receiving remittances still have an income per capita around 30 per cent lower than urban households not receiving remittances. However, it does have an impact on the gender divide. Households headed by women who do not receive any external support earn on average 12 per cent less than households led by men. If female-led households receive remittances, however, they earn about 10 per cent more than male-led ones.

“Migration is a necessity. At first, our children were shocked that their father was leaving for such a long period. But now it is normal for our children. My husband ensures our family has money, including for children’s clothes, nutrition, bicycles, gadgets, toys, etc.”
Female, 39-year-old, with husband working abroad, 2 children, low-income, rural

“Our daughter has all she needs [thanks to migration]. Food, clothes, gadgets. Otherwise, we would live in poverty.”
Female, 38-year-old, with husband working in construction in Ireland, 1 child, middle-income, urban

“The impact of me working abroad was both positive and negative. [The] children missed me, but I provided them with everything they needed. Now, I am back, and it becomes obvious that I need to work abroad, as my salary here — I am a teacher — is not sufficient even for what is strictly necessary for my children, not talking about adults.”
Male, 34-year-old, recently returned from France, where he was working in construction, 4 children, low-income, urban

“Financially, migration is very positive. It would have been very difficult if my husband didn’t leave. The children are small and the expenses are very high. Besides, we have to pay a mortgage. He left because we needed to pay the mortgage (ipoteca). I don’t think we could deal otherwise, not to have my husband abroad.”
Female, 28-year-old, social worker, with husband working in construction in Israel, 2 children, low-income, urban

If families value the positive financial effect of migration on children, local public authorities are more nuanced and consider that the financial aspect cannot compensate for the emotional challenges that migration causes on children.

“The departure of parents abroad has two effects: increased material well-being and emotional effects. The two are constantly put in antithesis. Money and material goods cannot compensate for the lack of parental affection.”
Interviewee at the Department of Social Assistance and Family Protection, Cimişlia

“Remittances, although they contribute to the children’s financial situation, cannot replace the parents’ love. Migration only helps the child financially, leaving the soul empty.”
Interviewee at the Directorate for the Protection of the Rights of the Child, Buiucani Sector

The COVID19 pandemic and the resulting economic crisis is having a particular effect on Moldovan migrants. As foreign workers often with low-skilled jobs, and sometimes without an official working status, they are among the first people to be affected in their host countries. According to a report on the impact of COVID19 on the Moldovan diaspora by the International Organization for Migration (IOM), 62 per cent of Moldovan migrants have reported decreased income due to COVID19. As a consequence, half of them have stopped sending remittances home.

Given the importance of remittances for receiving households, and particularly households with children, this crisis is likely to have an important impact on Moldovan people, and children especially. Many will have to find coping mechanisms to sustain their living standards, or remain at risk of falling into poverty.

“It’s sad to say, but since my husband works abroad, our living conditions have improved and our life is better.”
Female, 41-year-old, with husband working at a delivery company in Germany, 2 children, low-income, urban

“[Without migration] we wouldn’t survive. There is no job in our village. Here, my husband would need to work somewhere in town, anyway far away from the family, but with a much lower salary than abroad.”
Female, 38-year-old owner of a beauty salon with husband and mother working abroad, 2 children, middle-income, rural

“The COVID19 pandemic transformed the dynamics of migration in the Republic of Moldova. […] Many managed to return before the March 15 declaration of a state of national emergency in Moldova. The rest found themselves in extreme difficulty, since their jobs simply disappeared. Many migrants are at risk of losing their jobs and/or housing due to declining incomes in host countries. For the first time in decades, the probability of a significant and sustained return of Moldovans to their country of origin is emerging. […] The COVID19 pandemic is highly likely to affect remittance-dependent households, further amplifying the high level of poverty.”
Interviewee at the Department of Social Assistance and Family Protection, Cimişlia
2.1 Impact on household income

The impact of the coronavirus disease (COVID19) crisis on household income has been computed by comparing average households’ monthly income levels before and after March 2020. With the COVID19 crisis having persisted, the income levels since March 2020 reflect households’ new average incomes, rather than reflect simple delays in receiving income.

“The family budget has been affected and continues to be affected. Yes, it is a lasting situation, for at least the next six months.”

Interviewee at the Directorate for the Protection of the Rights of the Child, Buiucani Sector

Households with children in the Republic of Moldova have lost on average around 15 per cent of their income due to the COVID19 crisis. All population segments have been impacted. Those who receive remittances have been more impacted compared with those who do not receive remittances (with 17 per cent income drops compared with 13 per cent), but still remain slightly richer (in terms of available income per capita per month). The decrease in household income has similarly affected urban and rural households and households with single and multiple children. Households headed by women have been slightly more resilient than those headed by men (a drop in income of 11 per cent compared with 15 per cent), which is explained by the strong decrease in salary experienced by male-headed households (Figure 13). The poorest already living below the poverty line have not been impacted too much, mostly because many have no/partial salaries and do not receive remittances, two income sources which have been the most impacted by the crisis.

The survey figures unveil a variety of income situations. Fifty per cent of households with children have had a decrease in income, and 35 per cent even lost 20 per cent of their income. Thirty-eight per cent have been able to maintain their income to pre-crisis levels. Twelve per cent even state that their income has increased, although rather than representing a real household income increase, this hides specific cases in which families have resorted to coping mechanisms such as requesting support from friends or family, or taking extra jobs.
The reasons for falls in income vary (Figure 15). For households who do not receive remittances, the loss of income mostly results from a salary loss. Conversely, for those who do receive remittances, the loss of income can mostly be explained by a fall in remittances. In line with this pattern, households in urban areas and male-headed households mostly suffered from salary losses, while rural areas and female-headed households mostly suffered from a decrease in remittances. All segments seem to have resorted to non-official income sources to compensate for their income loss, particularly in rural areas, where a fair number of people were able to unofficially sell some of their home-grown farm products. Finally, people living below the poverty line have managed more than others to access social benefits, although amounts remain small. In general, no major changes in the amount and payment of social benefits was observed. Most households have continued to receive them and on time.

“I receive a [children’s] allowance. There were no changes, I was afraid of that, but there was nothing wrong, on time, and the whole amount. It is OK.”
Female, 30-year-old housewife, 1 child, low-income, urban

“I receive an allowance for my child and a pension as a person with disability. There were no changes, neither in amount, nor in the terms.”
Female, 28-year-old housewife, 1 child, low-income, rural

Figure 15. Change in income by source since COVID-19
Notes: Incomes before and after March 2020; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 520

The reasons for falls in income vary (Figure 15). For households who do not receive remittances, the loss of income mostly results from a salary loss. Conversely, for those who do receive remittances, the loss of income can mostly be explained by a fall in remittances. In line with this pattern, households in urban areas and male-headed households mostly suffered from salary losses, while rural areas and female-headed households mostly suffered from a decrease in remittances. All segments seem to have resorted to non-official income sources to compensate for their income loss, particularly in rural areas, where a fair number of people were able to unofficially sell some of their home-grown farm products. Finally, people living below the poverty line have managed more than others to access social benefits, although amounts remain small. In general, no major changes in the amount and payment of social benefits was observed. Most households have continued to receive them and on time.

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“I receive an allowance for my child and a pension as a person with disability. There were no changes, neither in amount, nor in the terms.”
Female, 28-year-old housewife, 1 child, low-income, rural
The sector of activity of the head of household had an impact on how severely the household was hit by the crisis (Figure 16). Construction, for instance, has been particularly affected – 45 per cent of households whose heads work in this sector have lost more than 20 per cent of their income. Transport and telecommunication, and agriculture have also been heavily impacted, with 41 per cent and 38 per cent, respectively, losing more than 20 per cent of income. Households whose heads work in public administrations or in large industrial companies have been less impacted.

“I stayed at home and received my salary as a state worker. Everything was OK. As for my wife, who is a teacher, nothing has changed as well since she is also a state worker.”

Male, 40-year-old soldier, 2 children, middle-income, urban

Households led by non-working females have been hit the hardest, with 59 per cent of them losing over 20 per cent of their income during the crisis. Pensioners have been more resilient because a large share of their income comes from their pension, which has been paid in full and on time by the state.

Independently from the sector of activity, people working in sales (and whose salary mostly depends on their performance) and entrepreneurs have been particularly hit. A fair number of small entrepreneurs were too small to cope by themselves and some complain of not having received enough support from the government to face the pandemic. Some also complains about the new safety and hygiene requirements requested by the government to reopen, which are difficult for them to implement.

“The COVID19 crisis affected me a lot. Staying at home does not generate sales. And my salary depends on the sales I make.”

Male, 29-year-old sales agent, 1 child, middle-income, urban

“In my case, the COVID killed 90 per cent of my income. All the facilities related to entertainment were and are still closed. So, now I am without any income at all.”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“I had a beauty parlour, it is closed now. Clients are sitting at home; they no longer need my services. Those who still need them are very few. I would like to reopen, but there are too many safety requirements. In case I don’t meet the requirements, the penalty is MDL22,000 – that is too much. [...] The state did not help us with anything.”

Female, 38-year-old, owner of a beauty salon, 2 children, middle-income, rural

A consequence of these changes in household income is increasing poverty in the Republic of Moldova. Between March and September 2020, the poverty rate of households with children has increased from 23 per cent to 31 per cent (Figure 17). The poverty rate has increased by six percentage points for households with children receiving remittances, compared with eight percentage points for those not receiving remittances, indicating a stronger resilience provided by the buffering effect of remittances. Households living in rural areas have been the most impacted, with the poverty rate increasing by nine percentage points (compared with by five percentage points in urban areas). In rural areas, 4 out of 10 households with children now live below the poverty line. By gender, the increase in the poverty rate has been higher for male-headed households (by 10 percentage points, compared with by 5 percentage points for women-headed households), due to the strong decrease in income experienced by these households. Overall, however, the poverty rate remains higher among households led by women than among those headed by men.

“...”

Female, 38-year-old, owner of a beauty salon, 2 children, middle-income, rural

Notes:

Households with children falling into poverty since COVID19 – by occupation

HORECA = hotels, restaurants and catering-related professions

* excluding “do not know” answers and participants refusing to answer on some variables

* Small sample size
The crisis has severely affected the country’s economy and families. Many people lost their jobs. Many companies ceased operations, some even suffered losses and closed down.

Interviewee at the Directorate for the Protection of the Rights of the Child, Buiucani Sector

When looking at the increase in the poverty rate by sector of activity or occupation of the head of household, there are some similarities with the sectors that have been hit the hardest by the crisis, as shown in Figure 16. Households whose heads work in construction or agriculture, for instance, are more likely to have fallen into poverty than others (up by 12 percentage points and 21 percentage points, respectively – see Figure 18). Exceptions are transport and telecommunications, with the increase in the poverty rate limited to three percentage points. Salaries tend to be higher and, while there has been a strong decrease in income, these households are more resilient.

Figure 19 provides an analysis of the vulnerability of different population segments, by mapping them based on their income levels before and after COVID19. The households with children who had the highest incomes before the crisis have maintained the highest income level since the crisis. These households are the most resilient and include those living in richer settings (urban, with a single child) and who in addition receive remittances. Conversely, people who had the lowest incomes before the crisis remain the poorest, including households living in the poorest settings (rural, with multiple children). As all segments of the population have been impacted by the crisis in more or less similar proportions, the profile of the most vulnerable groups has not evolved compared with pre-crisis time. Families living in rural areas and with multiple children (whether they receive remittances or not) remain the most vulnerable.

The COVID19 crisis has impacted both household incomes and family expenses. The vast majority of respondents are facing increased expenditures, meaning that living standards are falling even for those who have managed to maintain their incomes.

For a majority of households with children, the food budget has increased since COVID19, due to more meals being eaten at home by children, and by adults working from home (including some who would otherwise eat subsidized meals at work) or returning home having lost their jobs abroad. The cost of food has also risen as a result of market closures and stock restrictions, and because some households have bought healthier products.

“Our food expenses have increased, everyone is at home, eating much more than usual. [...] Before COVID, we went to the markets or to small shops, where the prices are more reasonable, but now only the supermarkets are open, prices are steep, and we, people, have no other choice.”

Male, 40-year-old soldier, 2 children, middle-income, urban

“Children ate at kindergarten; now they eat at home. I focus on vitamins, as well as on fresh fruits, and vegetables — a lot of money is spent on these.”

Female, 29-year-old on maternity leave, 2 children, middle-income, urban

“Prices have risen considerably during the COVID period. We buy more food, and it is more expensive than before. If you used to buy something from the open markets, like vegetables or fruits, now you buy all these only from the supermarkets at much higher prices.”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“‘We have increased our food budget. When children were at school, they had lunch there, now I am cooking more often at home. And we start buying more bread, sugar, and everything else.”

Female, 32-year-old city council employee, 2 children, middle-income, rural
Health expenses have also increased for a fair number of households. Public hospitals and family doctors, which are generally free services or covered by insurance, are crowded and only available by phone, so some people in need of physical examinations have to resort to private clinics, which are expensive and not always covered by insurance.

“I had an emergency, and could not go to the dentist, because it was closed. I had to go to a private clinic. It was very expensive.”
Male, 29-year-old musician, 1 child, middle-income, urban

“My mother was ill, she needed medical care, but we were only able to access the family doctor on the phone. So, we had to go to a private clinic, which cost a lot of money. What was free before the pandemic [doctor] now needs to be paid for and my insurance does not cover for such expenses.”
Female, 39-year-old bookkeeper, 1 child, middle-income, urban

“We spent a lot of money at private clinics, because the public polyclinic we usually depend on was not open. I could contact my doctor only on the phone, but this is not enough. We had to make some examinations in private clinics.”
Female, 29-year-old on maternity leave, 2 children, middle-income, urban

Some households have also spent more on medicine to treat COVID19 symptoms or to be ready to treat them should they appear.

“People have spent more on medication, trying to provide themselves with what is needed in case of symptoms of the disease.”
One of the heads of the Health, Social Protection and Education Departments, Balti

Some households have started buying medical insurance (at a cost of around MDL5,000 a year), out of fear of getting infected by the virus or to protect returning migrants. The cost has been a major barrier and limited support has been provided by the government.

“During the pandemic, both by fear of getting sick and due to the massive return of migrants, the number of requests for medical insurance increased. People are not ready to pay about MDL5,000 for insurance. If a person procures the policy in the middle of the year, he will pay the full amount. This generated people’s discontent. People also asked for help to cover for medical expenses.”
One of the heads of the Health, Social Protection and Education Departments, Balti

A majority of households have spent more on disinfectants, cleaning products, and so on, and regularly clean clothes and the household in an effort to keep it virus-free. An increase in prices of these products has also been noted.

“Everything related to hygiene and means of protection – a lot of money has been spent.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“Even the purchase of masks and disinfectants, or shoe covers when you enter medical institutions, all of this costs money and they are quite substantial additional expenses. This was true at the beginning of the pandemic, as now these things have become a little bit more affordable. From the start, the cost of MDL15 per mask was quite sensitive. And every three hours, you have to change them. It is pretty rough.”
Female, 45-year-old expert in electrical equipment, 2 children (including 1 under 18 years of age), high-income, urban

Utility bills have also jumped for many households. People have spent more time at home, pushing up their water and electricity costs.

“Utility expenses have increased, as we stay at home for longer time.”
Male, 29-year-old sales agent, 1 child, middle-income, urban

“As we stayed at home, communal expenses [utilities] grow considerably. Expenses are high, the house needs a lot of everything.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

Some households have also spent more on disinfectants, cleaning products, and so on, and regularly clean clothes and the household in an effort to keep it virus-free. An increase in prices of these products has also been noted.

“People have spent more on medication, trying to provide themselves with what is needed in case of symptoms of the disease.”
One of the heads of the Health, Social Protection and Education Departments, Balti

“I became more demanding of cleanliness. We wash clothes much often. We spend a lot in water and detergents. [...] Initially, we used just one-off masks, but they are very expensive. So, we bought cotton reusable masks, and are trying to wash them as often as possible.”
Female, 45-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“The prices [...] of medicines, masks or disinfectants have increased considerably.”
Interviewee at the Department of Social Assistance and Family Protection, Cimișlia

Utility bills have also jumped for many households. People have spent more time at home, pushing up their water and electricity costs.

“Utility expenses have increased, as we stay at home for longer time.”
Male, 29-year-old sales agent, 1 child, middle-income, urban

“As we stayed at home, communal expenses [utilities] grow considerably. Expenses are high, the house needs a lot of everything.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural
A fair number of households have had to equip themselves for online work and online learning. This has implied buying new laptops or smartphones, and spending more time on the Internet – and many complain about the lack of support from the government or their employers. Even for preschool children, parents have had to buy school supplies for them to continue their activities at home, such as coloured pencils.

“My youngest child was in kindergarten in the group preparing for school. Until March, all the material (coloured pencils, paper, etc.) was available for free at the kindergarten. Then, when the pandemic started, I had to buy all the material again, because we do not have them at home. It seems minor, but it is expensive.”

Female, 32-year-old city council employee, 2 children, middle-income, rural

“We had to buy another, better computer. We spent about MDL13,000 on it. My husband works for the state and we were supposed to benefit from some discounts on Internet. But we did not receive anything. We supported all these costs on our own, we received no help from the state, but rather spent from the family budget.”

Female, 45-year-old housewife, 1 child, middle-income, rural

2.2 Focus on the impact on remittance levels

Results from the survey indicate that households with children have had a drop in remittances of 25 per cent since the COVID19 crisis. Rural households have been particularly affected, with a drop of 28 per cent (compared with 22 per cent for urban households). According to the survey, urban and rural migrations differ mostly by one parameter: the percentage of households adults who have been abroad in the past 12 months but are currently in the Republic of Moldova, which is 21 per cent for rural households versus only 9 per cent for urban households (see Table 3). Two phenomena could therefore explain why rural households have had a higher fall in remittances: (1) migrants who used to go abroad for short-term migrations could not now do so, and (2) some of the migrants from rural areas who were abroad have already returned (and in higher proportions than for migrants from urban areas). Additional research would be needed to clarify the impact of each of these phenomena.

Since the beginning of the crisis, one in every four households with children have received only half, or less, of the amount received before (Figure 21). More than half of the households receiving remittances overall (54 per cent) have received less in remittances. Thirty-nine per cent of households continue to receive remittances in similar amounts to pre-COVID levels and 7 per cent have had an increase in remittances (mostly from ad-hoc additional transfers from the migrant family member, to help the family in the Republic of Moldova to cope with the crisis).

Figure 20. Change in monthly remittances (MDL) since COVID19

HH = head of household; MDL = Moldovan leu

Notes: Amounts before and after March 2020; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 297 (overall); N = 161 (urban); N = 136 (rural); N = 182 (male head of household); N = 66 (female head of household); N = 49 (below poverty line); N = 189 (above poverty line); excluding “do not know” answers and participants refusing to answer on some variables
Moldovan migrant workers in all countries and working in all sectors have been impacted by the crisis and have had to reduce the volumes of remittances they send to their family back home. Although sample sizes for disaggregation by country of migration and sector of activity are small, the main trends seem to indicate that households with a migrant in the Russian Federation have had a greater drop in remittances, while those whose migrant is in western Europe have been more resilient (Figure 22). In terms of sector, those who have a migrant with a high-skilled job seem to have been more affected, but sample sizes are small and more research (surveying migrant workers) is needed.

The type of contract under which the migrant worker is working seems to have an impact on how migrants have been impacted by the crisis in their migration country. In most cases, migrants working under an official contract have continued to receive their salary and to support their families.

“**My husband keeps sending remittances regularly. His salary was not affected at all, as he has a working contract for one year. Everything is stable so far.**”

Female, 28-year-old social worker with husband working in construction in Israel, 2 children, low-income, urban

“**In our family, all the income comes from my husband, who is abroad. He was not quarantined, he worked and had a constant salary.**”

Female, 39-year-old, with husband working abroad, 2 children, low-income, rural

Others migrant workers have been less lucky and have lost income in their host country. For some, the situation has been temporary (loss of income due to lockdown), while for others incomes have depended on the overall economic situation and decreases have been longer-lasting.

“**Our income has decreased. The company where my sister worked in Portugal at a meat factory. In March, when the pandemic started, he lost his job, tried to find another, and finally came back home unfortunately.**”

Female, 38-year-old, with husband working in the United Kingdom, 2 children, middle-income, rural

Migrants working in the most precarious conditions have been affected first and most greatly. Many have lost jobs, forcing a fair number to return to the Republic of Moldova. These returns often put families in serious financial difficulties, to support the extra family member while no longer receiving their remittances. According to initial estimations by the IOM, 150,000 migrants would have returned to the Republic of Moldova in 2020.

“**Our main source of income is my husband’s salary abroad that has decreased because of the economic situation. My brother’s business abroad was also partially affected. He has his own company and cashed out some money anyway, so we lived on this income for one time. I don’t think it will return to normal completely. Nobody helps us here locally.**”

Female, 45-year-old housewife, with husband and brother working abroad, 1 child, middle-income, rural

“**My husband did not work in England for two months, instead of earning money, he spent those two months living without work in England, finally he came back home.**”

Female, 38-year-old, with husband working abroad, 1 child, low-income, rural

“**My husband worked in Portugal at a meat factory. In March, when the pandemic started, he lost his job, said unfortunately because I am happy, he is with us, but our financial situation now is very dire, as we have almost no savings.**”

Female, 28-year-old housewife, 1 child, low-income, rural
“Revenues decreased as earnings from abroad stopped since I come back to Moldova. I had to return because of the pandemic, and I started working in education here, but my income is not comparable with the income I received abroad.”

Male, 30-year-old educator who used to work abroad before COVID19, 1 child, middle-income, rural

A fair number of returning migrants have complained about the lack of support from the government, even though some initiatives such as the distribution of food packages have been introduced. Most returning migrants plan to remit as soon as they can, since their families cannot sustain them without remittances, and most have limited savings.

“The government say they propose support for technical unemployment, but in reality, it is a fake support, impossible to benefit from. Many returnees did not benefit from technical unemployment. We have been affected financially, as my husband returned to Moldova.”

Female, 45-year-old housewife whose husband used to work in the United Kingdom, 1 child, middle-income, rural

“During the pandemic, a massive return of migrants to the country was observed. There have been many requests for financial help from returned migrants, as people were staying home without work. During March to May, aid was provided in the form of food packages.”

One of the heads of the Health, Social Protection and Education Departments, Balti

Before the pandemic, approaching half (45 per cent) of the receiving households with children were also receiving non-monetary remittances, in the form of clothes (39 per cent) and food (29 per cent). Since the pandemic, only 21 per cent of receiving households have continued to receive these non-monetary remittances (Figure 23). Although there has been a rise in the amount of non-monetary remittances (for both clothing and food) since the beginning of the pandemic, this is difficult to interpret conclusively. It could be because only the richest migrants have continued to send non-monetary remittances while the poorest migrants have stopped remitting (which thus pushes up the average amount), or because some migrants have replaced monetary remittances with non-monetary remittances. Again, more research is needed. Some of the respondents mention difficulties receiving pouches in the Republic of Moldova during the pandemic.

“For the holidays, my mother had prepared something for her granddaughter, but she couldn’t send it.”

Female, 30-year-old, whose mother works in a retirement home in Germany, 1 child, low-income, urban

“Yes, [the pandemic influenced the level of remittances]. Now I am in Moldova, without a job. I think we will sustain one more month, maximum two months. And I will need to go abroad again. I hope it will be possible.”

Male, 29-year-old musician who used to work in Romania before the pandemic, 1 child, middle-income, urban

“During the pandemic, due to the return of migrants, the volume of remittances decreased. We also expect a negative impact on families’ incomes and savings.”

One of the heads of the Health, Social Protection and Education Departments, Balti

“I am back due to the COVID situation. There was no work, although I would have liked to remain, and to earn more money. Most probably, I will try to go abroad once again, when the situation eases.”

Male, 34-year-old recently returned from France, where he was working in construction, 4 children, low-income, urban

“We have been affected very much. My husband stayed without a job for a month due to the pandemic. Now he is in Moldova, and going to go abroad at the first opportunity, as our family is out of money, and we live on the allowance of our baby from the local government, my compensation, and the salary of my sister, whose husband is abroad. He is also in a difficult situation, but he found a job, and sends us as much as he can.”

Female, 28-year-old, with husband recently returned from Portugal, where he was working at a meat factory, 1 child, low-income, rural

“My husband remained without a job due to COVID and had to return to Moldova. Now we have no income. He is going to go abroad in a week or two, as we cannot afford to spend all our savings.”

Female, 43-year-old, with husband recently returned from the Russian Federation, where he was working in construction, 2 children (including 1 under 18 years of age), low-income, rural

![Figure 23. Non-monetary remittances before and after COVID19](image-url)

MDL = Moldovan leu

Notes: Before and after March 2020; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 501 (overall); N = 61 to 150 (clothing); N = 61 to 124 (food); excluding “do not know” answers and participants refusing to answer on some variables.
To compensate for income losses and increased costs at home, households with children are using different types of coping mechanism. In the context of the coronavirus disease (COVID19) crisis, the coping mechanisms can be categorized (see Table 4) by taking into account:

- Temporality – how long can this coping mechanism be used?
- Conditions – what is needed for this coping mechanism to be used?
- Impact on the household well-being – does this coping mechanism impact living standards?

The type of coping mechanism is influenced by many factors, including income level, opportunities (to get a new job for instance), individual preferences (do I prefer to work more or to cut down on my leisure activities?), and so on. Households are generally using a mix of different coping mechanisms to get through the crisis (Figure 24).

During the COVID19 crisis, households with children in the Republic of Moldova have had to resort to coping mechanisms to compensate for decreasing income. Most households have used coping mechanisms that imply a decrease in their living standards. Other popular coping mechanisms have been temporary mechanisms (which households will not be able to benefit in the long term) and sustainable coping mechanisms that require good economic conditions in the Republic of Moldova. Only very few (3 per cent) have resorted to the state and requested Ajutor Social. Only 8 per cent of all respondents interviewed have stated that they do not use any coping mechanism to face the COVID19 crisis. Even those who have not yet had any loss of income have started using coping mechanisms to face rising expenses and in anticipation of a lasting crisis.

### Table 4. Categories of coping mechanism

<table>
<thead>
<tr>
<th>Category</th>
<th>Objective</th>
<th>Examples</th>
<th>Characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary</td>
<td>Sustain current living standards</td>
<td>Using savings, selling assets, asking friends and family for support, etc.</td>
<td>Not sustainable in the long term</td>
</tr>
<tr>
<td>Highly dependent on economic resilience or recovery</td>
<td>Working more, requesting non-working household members to work, borrowing money, etc.</td>
<td></td>
<td>Mechanisms that help households to sustain their living standards during the crisis. Country-level economic resilience and recovery are strong dependencies (employment opportunities, functioning financial institutions, etc.)</td>
</tr>
<tr>
<td>Focusing on decreasing living standards</td>
<td>Survival/meet basic needs (food, education, health, etc.)</td>
<td>Cutting down on regular expenses, clothing, health care, food, leisure activities</td>
<td>Impacts household members’ well-being</td>
</tr>
<tr>
<td>Relying on state support</td>
<td>Unemployment benefits, social welfare (Ajutor Social), etc.</td>
<td></td>
<td>Support provided by the state to the most vulnerable people to help them meet their basic needs in crisis times</td>
</tr>
</tbody>
</table>
More than half of households with children (55 per cent) have cut down on leisure activities to face the pandemic’s economic consequences. They have given up entertainment (movies, theatres, etc.), going to cafes and having summer vacations.

“With the money for the summer vacation, I paid for the utility expenses.”
Female, 38-year-old owner of a beauty salon, 2 children, middle-income, rural

“We had to cut down on entertainment, going out to cafes, buying clothes.”
Male, 40-year-old soldier, 2 children, middle-income, urban

“The pandemic affected the country’s economy […]. During this period, people were more focused on getting food and medicines, as well as basic necessities, and reduced spending on travel, entertainment, repairs, etc.”
Interviewee at the Directorate for the Protection of the Rights of the Child, Buiucani Sector

Fifty-eight per cent of households have had to cut down on regular expenses, notably clothes. Households have first tried to limit clothing expenses for adults and then prioritized children’s expenses for those most in need. Some have mentioned being reluctant, in this uncertain environment, to invest in clothes for school, with online learning possibly being reintroduced at any time.

“We couldn’t afford buying clothes as we used to. We don’t know what will happen next, and what the perspectives are – that’s why we try and restrict ourselves.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

“We saved on clothes. Our eldest daughter is now growing slowly and I did not buy anything for her for school. But for our son, who has grown out so much recently, we need to spend on clothes, but we limited to the most necessary. We can return to online studies any time, and that’s why we considered it unnecessary to invest for a longer period of time.”
Female, 32-year-old city council employee, 2 children, middle-income, rural

“We couldn’t afford buying a new school suit for our child. He went to school with last year’s outfit.”
Female, 33-year-old, unemployed, 1 child and taking care of her 3 nephews while their mother works abroad, middle-income, rural

Worryingly, 15 per cent of households with children have even had to cut down on meals. Most reduced have been the expensive categories of food such as meat, fish, fruit and vegetables.

“We had to cut down on everything, including food. We had no income at all.”
Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“We saved on food, fruits, vegetables. Consumed only the strictly necessary.”
Female, 39-year-old housewife, 2 children, low-income, rural

“We had to cut down on regular expenditure (clothing, health, etc.)”
Male, 41-year-old teacher, 2 children, middle-income, rural

“Regarding nutrition, we renounced to citrus, meat, fish, we practically excluded them all.”
Male, 41-year-old teacher, 2 children, middle-income, rural

Figure 24. Coping mechanisms against the financial effects of COVID-19
Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 1,015
Households that have had to cut down on meals are more likely to be led by women, to live in rural areas, live below the poverty line and to receive less in remittances (Table 5). Despite these main trends, having to cut down on meals is a coping mechanism that all population segments have resorted to.

Twenty-two per cent of households have used their savings to cope with the crisis. This money was initially put aside for vacation or to invest in housing (buy an apartment, make some repairs, etc.). The COVID19 crisis is therefore going to have lasting effects in terms of families’ well-being and capacity to invest. Respondents who have used their savings to cope with the situation tend to worry about the future. As the crisis is lasting, many households are running out of savings and will have to resort to other coping mechanisms in the coming months.

**Table 5.** Characteristics of households who had to cut down on meals

<table>
<thead>
<tr>
<th>Characteristics of households who had to cut down on meals</th>
<th>Characteristics of households who did not cut down on meals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage led by female</td>
<td>34%</td>
</tr>
<tr>
<td>Percentage with multiple children</td>
<td>50%</td>
</tr>
<tr>
<td>Percentage living in rural areas</td>
<td>50%</td>
</tr>
<tr>
<td>Percentage living below the poverty line</td>
<td>31%</td>
</tr>
<tr>
<td>Percentage receiving remittances</td>
<td>31%</td>
</tr>
<tr>
<td>Percentage of total household income received in remittances</td>
<td>17%</td>
</tr>
</tbody>
</table>

Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances)

"We currently live with our parents. Last year, I bought an apartment and saved money for the repairs. We wanted to move to our apartment, but all the repair work has been postponed because of the crisis."

Female, 32-year-old teacher, 1 child, middle-income, rural

Some of the households running out of savings have started selling their assets (7 per cent of the surveyed households have done so), which directly impacts families’ quality of life and, for some, causes additional psychological damage as long-held family items have had to be sold.

"We spent all our savings and we had to sell everything that was possible to sell."

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

"I spent practically all my savings. Moreover, I sold part of my collection of musical equipment."

Male, 29-year-old musician, 1 child, middle-income, urban

In some households, respondents have tried to find extra jobs to cope with the crisis. Ten per cent have asked working family members to work more, while others have requested non-working adults (4 per cent) or even children (2 per cent) to start working. Most have continued this extra work, a coping mechanism that is likely to have an impact on children whose parents are going to be more tired and less available to take care of them.

Working more is a coping mechanism that depends greatly on the resilience or recovery of the Moldovan economy. Some respondents have looked for extra jobs without being able to find any. Another barrier to working more, especially for women, has been the closure or reduced hours at schools and kindergartens.

"We had to spend part of our savings to make ends meet. These were money for the summer vacations. We had saved money to buy an apartment in Chișinău for the girls. These savings have partly vanished."

Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

"I was searching for a part-time job but did not find any."

Female, 29-year-old on maternity leave, 2 children, middle-income, urban

"We had to spend almost all our savings on utilities, food and a new laptop for online studying."

Female, 37-year-old housewife, 1 child, low-income, rural

"No [I have not taken an extra job]. I would like to, but I have no possibility since nobody except me can stay at home with the children."

Female, 28-year-old social worker, 2 children, low-income, urban
“I refer to the current restrictions. People work until 5pm or 6pm, but kindergartens close at 3pm. It is very inconvenient.”
Female, 30-year-old housewife, 1 child, low-income, urban

“I had to take one more job. I now sell scratch cards for mobile operators to earn more money.”
Male, 29-year-old sales agent, 1 child, middle-income, urban

“We launched several online stores […] Without the pandemic, I would have run my business differently.”
Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“I launched another business because I understood that we would not be able to survive otherwise. When I saw what was happening in China, I started buying dairy cows to start a farm. I understood that the difficulties were just beginning.”
Male, 46-year-old cattle and bee farm owner, 4 children (including 2 under 18 years of age) and taking care of 2 orphans under the age of 18 years, middle-income, rural

“I started several new jobs. I took every opportunity I could.”
Male, 29-year-old musician, 1 child, middle-income, urban

“The situation [during lockdown and its immediate aftermath] was really bad. I lost about 70 per cent of my salary. During that period, I had to get involved in other activities, because the financial situation was really poor.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

In most cases, households with children have resorted to several coping mechanisms at the same time.

“We saved on food. We ate our own vegetables and got food rom our animals (meat and dairy). We had to spend on hygiene, disinfectants and cleaning products. This was really expensive for us. I saved on clothes, beauty, hair-dressing. We had some money we put aside for harsh times that we had to spend as well.”
Female, 45-year-old housewife, 1 child, middle-income, rural

“I tried to save as much as I could. I switched to home baking. I don’t buy bread or sugar anymore, only eggs. I had to draw from the savings we had for the summer vacation to pay for utilities. We spent nothing on clothes and shoes during this period. The children went to school with what we had from last year. Shorter on the sleeves, but it worked.”
Female, 38-year-old owner of a beauty salon, 2 children, middle-income, rural

“We saved absolutely on everything and ate what we had grown at home, we tried not to buy anything. We didn’t buy clothes or shoes. We tried to save a maximum so that we could pay for electricity and water. I spent the money I saved for my driving lessons and my driving licence.”
Female, 47-year-old temporary worker taking care of her grandson, low-income, rural

The survey sheds light on differences in the coping mechanisms by segment (Figure 25). Households receiving remittances are slightly more resilient than those not. They have been more likely to use their savings to sustain their living standard (24 per cent versus 20 per cent for households not receiving remittances), less likely to cut down on leisure (46 per cent versus 60 per cent) and less likely to reduce regular expenses (51 per cent versus 62 per cent) or on meals (12 per cent versus 18 per cent). They have also been less likely to default on their loans (3 per cent versus 7 per cent for those not receiving remittances) and to have to borrow money (17 per cent versus 22 per cent).

Figure 25. COVID19 financial coping mechanisms – households receiving versus those not receiving remittances

Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 501 (receiving remittances); N = 514 (not receiving remittances)
Households already living below the poverty line before the COVID19 crisis have had less in savings, and only 18 per cent have resorted to these, compared with 25 per cent of households living above the poverty line (Figure 26). As their expenses for leisure, and regular products and services were already stretched, they have had less room for manoeuvre and have been more likely to have to cut down on meals (23 per cent versus 16 per cent of households living above the poverty line).

Households with children have tried their best to cope with the crisis by limiting their expenses to the strictly necessary, using their savings and trying to find extra sources of income. While many are already having lower living standards, the situation is expected to worsen. Savings are running out and families will have to find new ways to cope. Households who resort to working more are depending on the economic situation in the Republic of Moldova. Since the crisis is due to last, it is expected that many households with children will have to cut down further on leisure activities, regular expenses and meals to make ends meet.

Gender disparities in the COVID19 crisis

- Men and women have been affected differently by the COVID19 crisis.
- Since schools and kindergartens have been closed or working at reduced hours, many women have had to step back from work (stop working, working fewer hours, taking days off) to take care of their children.
- This has led to particularly dire situations for single mothers and mothers who are the sole or main household income earners. They have faced difficulties covering basic needs such as food and hygiene.
- Men have been more affected in terms of having their labour rights respected. This has been true particularly for men employed informally, who are often asked to take unpaid leave, and have their contracts terminated without notice, thereby losing access to social and medical insurance.

“During the pandemic, many mothers with preschool children had to reduce their working time to take care of their children, most kindergartens being quarantined. Men have been affected more from the point of view of respecting their rights at work, and it is anticipated that more of them will not be able to benefit from the social or medical insurance system in the future. Several men have been on unpaid leave and are at risk of losing their jobs in the near future, as they are involved in informal work which offers no guarantee whatsoever.

“Mothers with children will find it difficult to cover for their basic needs such as food, hygiene, etc., if the measures to combat the effects of pandemic are maintained.”

Interviewee at the Department of Social Assistance and Family Protection, Cimișlia
4.1 Impact on nutrition

A majority of households (70 per cent) say that the coronavirus disease (COVID19) crisis has not yet affected children’s nutrition. Despite falling income and rising expenses, many parents have decided to prioritize children’s nutrition over other expenses.

“We saved on adults’ food, not children’s.”
Male, 46-year-old employee in the financial sector taking care of 2 children under 18 years of age, middle-income, urban

“It is a very difficult period for us. We save on many things, but not on food for our children. Nutrition of my son did not change at all. It even got better and [higher quality], because he eats only homemade food prepared by me.”
Female, 45-year-old housewife, 1 child, middle-income, rural

Many respondents say their children have been eating more healthily since the beginning of the pandemic as parents have seen it as a way to protect their children against the virus.

“I focused on vitamins, as well as on fresh fruits and vegetables. A lot was spent on these.”
Female, 29-year-old on maternity leave, 2 children, middle-income, urban

“We can’t save on food, it is our health and the health of our children. Good nutrition is very important in the period of the pandemic.”
Male, 29-year-old sales agent, 1 child, middle-income, urban

Immunity depends on the quality of food. So, we spent more on food, because we focused on healthier food and on more expensive produce.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“As family members spend more time at home, some households have cut down on fast foods and snacks, consuming more home-made food that is generally considered healthier.

“In my family, we started eating healthier food to strengthen our immunity, less fast food, more natural homemade food.”
Female, 45-year-old expert in electrical equipment, 2 children (including 1 under 18 years of age), high-income, urban

“Our nutrition improved, we stopped buying unhealthy delights […], going to fast-food joints, eating chips, and consumed healthier food.”
Female, 38-year-old housewife, 1 child, middle-income, urban

Despite the focus on children’s nutrition by most families, 30 per cent of the surveyed households have experienced some changes (Figure 27). Households led by women, which are generally more vulnerable, and those living below the poverty line have been particularly impacted, with 40 per cent seeing some changes in children’s nutrition. Rural households – despite their vulnerability (poor, within many having fallen below the poverty line) – have mostly (69 per cent) been able to maintain the same levels of children’s nutrition through the consumption of home-grown products.

As shown in Figure 28, the changes in children’s nutrition have mostly involved less variety in meals (21 per cent of households) or less food of high nutritional value (16 per cent of households). Even more worrying, 4 per cent of households (and 7 per cent of those living below the poverty line) have had to cut down on the quantity of food consumed by their children.

“The children did not suffer. We did our best to feed them well. A lot was spent on food for children, as we were buying healthy food, with a lot of fruits and vegetables. During the pandemic, children ate even more than usual, and children’s nutrition was even healthier than before.”
Female, 45-year-old housewife, 1 child, middle-income, rural
**Figure 27.** Change in children’s meals since COVID19

Percentages for households claiming no change / HH = head of household

Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 1,015 (overall); N = 501 (receiving remittances); N = 514 (not receiving remittances); N = 536 (urban); N = 479 (rural); N = 505 (single child); N = 510 (multiple children); N = 672 (male head of household); N = 246 (female head of household); N = 133 (below the poverty line)

**Figure 28.** Change in children’s meals since COVID19 – details

Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 1,015 (overall); N = 501 (receiving remittances); N = 514 (not receiving remittances); N = 536 (urban); N = 479 (rural); N = 505 (single child); N = 510 (multiple children); N = 672 (male head of household); N = 246 (female head of household); N = 133 (below the poverty line)

Less food of high nutritional value (meat, diary products, etc.)

<table>
<thead>
<tr>
<th>Overall</th>
<th>Receiving remittances</th>
<th>Not receiving remittances</th>
</tr>
</thead>
<tbody>
<tr>
<td>72%</td>
<td>74%</td>
<td>67%</td>
</tr>
<tr>
<td>Urban</td>
<td>71%</td>
<td>69%</td>
</tr>
<tr>
<td>Rural</td>
<td>68%</td>
<td>72%</td>
</tr>
<tr>
<td>Single child</td>
<td>60%</td>
<td>74%</td>
</tr>
<tr>
<td>Multiple children</td>
<td>61%</td>
<td>61%</td>
</tr>
<tr>
<td>Female HH</td>
<td>72%</td>
<td>68%</td>
</tr>
<tr>
<td>Male HH</td>
<td>68%</td>
<td>74%</td>
</tr>
<tr>
<td>Below poverty line</td>
<td>61%</td>
<td>61%</td>
</tr>
</tbody>
</table>

Less variety in meals

<table>
<thead>
<tr>
<th>Overall</th>
<th>Receiving remittances</th>
<th>Not receiving remittances</th>
</tr>
</thead>
<tbody>
<tr>
<td>21%</td>
<td>23%</td>
<td>20%</td>
</tr>
<tr>
<td>Urban</td>
<td>21%</td>
<td>20%</td>
</tr>
<tr>
<td>Rural</td>
<td>24%</td>
<td>20%</td>
</tr>
<tr>
<td>Single child</td>
<td>14%</td>
<td>20%</td>
</tr>
<tr>
<td>Female head of household</td>
<td>24%</td>
<td>20%</td>
</tr>
<tr>
<td>Male head of household</td>
<td>20%</td>
<td>20%</td>
</tr>
<tr>
<td>Below poverty line</td>
<td>20%</td>
<td>20%</td>
</tr>
</tbody>
</table>

Children are eating fewer meals a day or smaller quantities

<table>
<thead>
<tr>
<th>Overall</th>
<th>Receiving remittances</th>
<th>Not receiving remittances</th>
</tr>
</thead>
<tbody>
<tr>
<td>23%</td>
<td>21%</td>
<td>25%</td>
</tr>
<tr>
<td>Urban</td>
<td>23%</td>
<td>21%</td>
</tr>
<tr>
<td>Rural</td>
<td>21%</td>
<td>25%</td>
</tr>
<tr>
<td>Single child</td>
<td>23%</td>
<td>25%</td>
</tr>
<tr>
<td>Female head of household</td>
<td>21%</td>
<td>21%</td>
</tr>
<tr>
<td>Male head of household</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Below poverty line</td>
<td>25%</td>
<td>25%</td>
</tr>
</tbody>
</table>

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“I had to save on everything, including on food for my children.”

Male, 29-year-old musician who used to work in Romania before the pandemic, 1 child, middle-income, urban

“With nutrition, we had to limit ourselves to what was strictly necessary.”

Female, 30-year-old housewife, 1 child, low-income, urban

“Less fruit, citrus, less meat, dairy, fish. There are also situations when a higher-quality product is substituted with lower quality and cheaper items.”

Male, 41-year-old teacher, 2 children, middle-income, rural

The households who have had to cut the nutritional value of their children’s meals say the main reasons (Figure 29) are less household income (68 per cent), higher food prices (62 per cent) and increased food budget (28 per cent).

**Figure 29.** Reasons for less nutritional value in children’s meals since COVID 19

Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 287 (only households that had a change in children’s nutrition)
Families with children spent more money on food because children no longer ate at school. This was felt more acutely by vulnerable families, who receive free lunches at school. For example, for children in grades 5 to 12 who come from vulnerable families, MDL9 million are spent annually on school meals. These expenses were put on the parents’ shoulders during the lockdown.

One of the heads of the Health, Social Protection and Education Departments, Balti...

“Nothing has changed, we rely on home-grown produce.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

“Families with children spent more money on food because children no longer ate at school. Before, we used to eat bananas; we now eat more apples, and why not?”
Female, 32-year-old city council employee, 2 children, middle-income, rural

“I tried to manage our budget as rationally as possible. [...] On the contrary to those from towns, we get hold of meat, milk, eggs, fruits, vegetables, etc.”
Female, 32-year-old teacher, 1 child, middle-income, rural

“We have fruits and vegetables from our own garden. Before, we used to eat bananas; we now eat more apples, and why not?”
Female, 32-year-old teacher, 2 children, middle-income, rural

“Nothing has changed, we rely on home-grown produce.”
Female, 32-year-old city council employee, 2 children, middle-income, rural

“In rural areas, every family has access to food easily at home or at neighbours’, that’s why when the pandemic started and the shops were closed for two to three weeks, we did not feel this so much, compared to those from towns. Maybe we missed a few things like cheese or sweets, but these are not essential at all.”
Male, 41-year-old teacher, 2 children, middle-income, rural

4.2 Impact on education

Many families recognize that schools have offered alternative ways of learning during the COVID19 pandemic. Parents have tried as much as possible for their children to participate in online lessons — some buying extra materials to enable them to do so. According to the quantitative survey, 56 per cent of households say the school has offered some effective alternative ways of learning, which the children have attended (Figure 30). These results should be analysed cautiously, however, as the qualitative research reveals many gaps.

Despite efforts by both schools and parents, many challenges were encountered at the time of online schooling (from early April until the end of the 2019–2020 school year in June). A large majority of parents are particularly dissatisfied with the quality of education received by their children online. Most value the teacher–pupil relationship, especially for young children learning how to read and write, and do not believe in online learning. For older children, many parents complain about the absence of lessons for some subjects and the lack of concentration of their children, which teachers are unable to monitor online during lessons.

“Education must be at school, not online. The teacher sees the pupils, sees their real knowledge. [...] Direct communication between the teacher and pupils is needed.”
Male, 40-year-old soldier, 2 children, middle-income, urban
There are many problems with online schooling. It’s a big problem for preschool groups – imagine what it is like to teach children to read and write online.

Male, 46-year-old cattle and bee farm owner, 4 children (including 2 under 18 years of age) and taking care of 2 orphans under 18 years of age, middle-income, rural

My daughters were affected by online studying. It cannot replace normal schooling. It is absolutely awful. How can you teach your child to read and write online?

Female, 41-year-old housewife, 2 children, low-income, urban

Online lessons were a disaster. [...] For some subjects, there were no lessons at all.

Male, 46-year-old employee in the financial sector taking care of 2 children under 18 years of age, middle-income, urban

During three months, my children learned nothing on some subjects, as there were no online courses for these subjects. Only mathematics, Russian, history and biology were available online. Some online courses were useless. Some pupils participated, some did not. Who listens to what is said, who doesn’t? – no one knows.

Male, 40-year-old soldier, 2 children, middle-income, urban

Online learning is very bad, very formal. The quality is very poor. Children are not concentrated on lessons. They play or do other things during the lessons.

Male, 46-year-old sales agent, 1 child, middle-income, urban

A lot is lost in the educational process. We already have jokes: the ‘COVID generation’, without diploma, and without knowledge. It is not good for them.

Male, 41-year-old teacher, 2 children, middle-income, rural

A lack of equipment is a barrier for many households. Online learning requires at least one device (computer, tablet or mobile phone) with a reliable Internet connection for every child of school age in the household. Some households have equipment, but not enough for all their children. Others have outdated computers that cannot connect to the online platforms used by teachers. The quality of the Internet connection is an issue in some areas as well as the added cost of using the Internet all-day long for the online lessons.

These issues are particularly acute in rural areas, for households led by females who are more vulnerable, and for households living below the poverty line (Figure 31). Thirty-nine percent of these households do not own any computer or laptop and a probably much higher number do not have one device for every child of school age.

Children faced difficulties accessing education, because not everyone has access to the Internet or has a computer, a tablet or a smartphone. There were challenges for accessing learning platforms, as many lack digital skills. This is true not only for marginalized groups, but also for most children in the Republic of Moldova. Whenever teachers practise online lessons instead of face-to-face learning, many students are not able to participate due to low digital skills or lack thereof.

Moreover, when family members learn and work from home, this often leads to a competition for the use of existing computers, tablets or smartphones in the household, which means that not everyone can learn and work at the same time. The most marginalized families may not have electronic devices at all, completely excluding them from learning and virtual social contacts.

Interviewee at the Department of Social Assistance and Family Protection, Cimișlia

Figure 31. Household information and communications technology by segment

Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 1,015 (overall); N = 536 (urban); N = 479 (rural); N = 246 (female head of household); N = 143 (below the poverty line)
“There are technical problems. In the country, families have two to three children; it is expensive to have two to three computers at home for online lessons. This is a real problem, especially in rural areas. Also, there are problems with the Internet to get a dependable connection.”
Female, 26-year-old teacher, 1 child, low-income, urban

“Luckily, we had a good Internet connection, and I was able to participate to all the lessons. I knew many other children from our village who could not participate in online classes, due to the absence of computer, or of an Internet connection.”
Female, 32-year-old city council employee, 2 children, middle-income, rural

“There are many cases where pupils have very poor Internet connection, or no Internet connection at all, or don’t have the necessary devices.”
Male, 41-year-old teacher, 2 children, middle-income, rural

“There are many cases in villages where children do not have the necessary equipment for online lessons. I estimate one third of the pupils are in such situations. Or they don’t have good Internet access.”
Male, 41-year-old teacher, 2 children, middle-income, rural

“In many families, children have no telephone or laptop for online studying.”
Female, 41-year-old housewife, 2 children, low-income, urban

“Many children in our class did not take the online lessons. They did not have the necessary devices, nor computers, nor the Internet connections – out of 27, only 13 participated in online lessons.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

Findings from the quantitative and qualitative research were confirmed during the interviews with local public authorities and are in line with various studies conducted when schools closed. One of these studies found that over 18,000 children did not participate in the educational process in the first week of school closing.

It is not surprising to observe that households with multiple children or with no laptop at home have been among the most dissatisfied with access to education for their children during the pandemic (Figure 32).

Many teachers have not been prepared to switch to online learning. They have not had the digital skills nor the pedagogical material to switch to online lessons, and have lacked equipment. An estimate 3,000 teachers did not have the right devices to teach online in the first week of school closing. Many respondents to the survey feel they did not receive the support they needed from the state, notably to buy the equipment needed to work online.

“None of the teachers were ready for that. At the beginning, it was very difficult. Teachers were put in unfavourable conditions. We were told that we needed to pass to online studying, but no support was offered by the state. The objective was set, but we had to solve all the problems by ourselves. Neither the school, nor the state was involved. I needed to purchase a more performant mobile phone, a new laptop, accessories, all these with my own money.”
Female, 26-year-old teacher, 1 child, low-income, urban

“Teachers didn’t know how to work with the platforms sometimes – there were problems.”
Female, 45-year-old housewife, 1 child, middle-income, rural

“In my case, the lack of necessary equipment for teachers was a problem. I had to purchase all that was necessary on my own: a new computer, a new mobile phone, accessories, everything.”
Female, 32-year-old teacher, 1 child, middle-income, rural

Figure 32. Unsatisfying access to education by segment
Note: Unsatisfying = effective alternative offered by school but children could not attend, alternative offered by school but not effective, or no alternative offered; during the time schools were closed in 2020; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 863 (overall); N = 446 (multiple children); N = 267 (do not have a laptop); excluding “do not know” answers and participants refusing to answer on some variables

<table>
<thead>
<tr>
<th>Segment</th>
<th>Overall</th>
<th>Multiple children</th>
<th>Do not have a laptop at home</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>25%</td>
<td>28%</td>
<td>30%</td>
</tr>
</tbody>
</table>

Overall  Multiple children  Do not have a laptop at home
In a fair number of cases, parents have had to get involved and support their children with online learning. This has been true especially for young children, who are not digitally literate, find it more difficult to concentrate and are not used to having no teacher in front of them. While older children have been more autonomous, some have had difficulties following or understanding the courses without being able to ask questions of the teacher. Some parents have found it hard to support children because they lack the knowledge on some subjects.

During the research in August and September 2020, children were just going back to school for the beginning of the new school year and a few insights have been gathered on schools reopening, which could be confirmed by more research.

The Ministry of Education of the Republic of Moldova proposed different models for schools reopening, going from 100 per cent physical attendance to 100 per cent online learning, should the situation be critical. Models between the two include attendance in shifts, alternating between physical and online courses, classes being divided into groups, lessons lasting 30 minutes instead of 1 hour, and so on – all aiming to implement social distancing.

“Now the lessons which used to last 1 hour are 30 minutes only. I don’t think it is enough to go through the whole material, the new themes, the homework. Children do not receive the maximum possible amount of knowledge. Online learning is convenient for the state. It saves energy, salaries, etc., but the result is poor.”

Female, 45-year-old housewife, 1 child, middle-income, rural

“En even now my child is one day at school and one day at home. Parents must take days off to stay home to take care of their children. Children have immunity, they need socialization, they need to go to school every day.”

Female, 45-year-old expert in electrical equipment, 2 children (including 1 under 18 years of age), high-income, urban

“With the nine-year-old we had problems with online lessons. He understood nothing. Teacher addresses to all pupils. It isn’t possible to ask questions. He comes to me, asking to clarify. So we had to learn online together. I spent my time doing part of the teacher’s job.”

Female, 38-year-old owner of a beauty salon, 2 children, middle-income, rural

“For parents, it is complicated to monitor all their children. If they are small, they can help them with homework, but for the older ones, parents do not know the subjects enough.”

Female, 26-year-old teacher, 1 child, low-income, urban

“With studies, from the beginning it was the problem [...]. Parental help was needed.”

Female, 45-year-old housewife, 1 child, middle-income, rural

“My boy goes to first class. Without me he couldn’t have followed the lessons. I had to stay with him all the time, it was very difficult for us.”

Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

Many parents are sceptical about the quality of education delivered under the new measures introduced by the government to reopen the schools. Some worry about health conditions at schools – the lack of hand washing items in particular. Some say they have been asked to pay for these items, further straining their household budgets.

“There are problems at schools, with soaps and disinfectants. Our school does not provide any. Parents have to buy these items for the school with their own money.”

Female, 38-year-old owner of a beauty salon, 2 children, middle-income, rural

“The government has just announced that it will take responsibility for disinfectants, but this was not the case. We, the parents, collected money for all this, although it is forbidden to collect money from parents. But what can we do?”

Female, 32-year-old city council employee, 2 children, middle-income, rural

Some respondents highlight the gap that online learning creates between pupils who are able to attend and get the most out of online courses, and those who are not. More research among teachers and parents could assess and quantify this gap.

“Nothing can replace face-to-face lessons. You can put in place the best platforms for online studying: it won’t work. Why? There is no effective communication between the pupils and the teacher online.”

Female, 32-year-old teacher, 1 child, middle-income, rural

“My boy goes to first class. Without me he couldn’t have followed the lessons. I had to stay with him all the time, it was very difficult for us.”

Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

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Female, 32-year-old city council employee, 2 children, middle-income, rural

“The large majority of parents prefer imperfect options that enable physical school attendance instead of 100 per cent online studying.”

“I think going to school, even part time, is the most effective way for our children to learn. And yes, there is a sanitary risk but we have to accept it.”

Male, 41-year-old teacher, 2 children, middle-income, rural

“In exceptional cases, online courses make sense, but in general, online studying cannot replace courses in classes. Even if the duration of the courses is reduced to 30 minutes, this is much better than online courses. If online studies become the rule, there will be a blow to the quality of our children’s studies.”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“So, parents have had to get involved and support their children with online learning. This has been true especially for young children, who are not digitally literate, find it more difficult to concentrate and are not used to having no teacher in front of them. While older children have been more autonomous, some have had difficulties following or understanding the courses without being able to ask questions of the teacher. Some parents have found it hard to support children because they lack the knowledge on some subjects.”

Female, 39-year-old bookkeeper, 1 child, middle-income, urban

“It is a failure. There is already a gap between pupils, and it will continue to grow [...] if online learning continues.”

Female, 39-year-old bookkeeper, 1 child, middle-income, urban
4.3 Impact on health

Access to health services for children has decreased for 37 per cent of the households since the pandemic (Figure 33). Difficulties accessing health services have been more acute in urban areas (44 per cent report decreased access, compared with 30 per cent in rural areas), in the north (44 per cent decreased access) and in Chișinău (42 per cent).

“They programmed us [set a doctor’s appointment] in three weeks — it’s not normal. A lot can happen during this period. You meet a doctor when you need it, which is now, not in three weeks!”

Female, 39-year-old bookkeeper, 1 child, middle-income, urban

“Our daughter had problems with her teeth and needed surgery, but it was postponed.”

Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“The doctors in the clinics were too tired and the family doctors were not available, except online. We could not address to doctors during that period, although there were reasons to.”

Female, 33-year-old, unemployed, 1 child and taking care of her 3 nephews while their mother is abroad, middle-income, rural

One of the main reasons for reduced access to health services has been the unavailability of health professionals, who have been overwhelmed dealing with COVID19 patients (cited by 52 per cent of the respondents reporting less access to health services for their children; see Figure 34). Some scheduled appointments have been postponed, and some have been hard to reschedule.

Another important reason for the lower access to health services has been the fear of coronavirus infection, reported by 41 per cent. This belief is particularly strong in rural areas and among respondents living below the poverty line (cited by 49 per cent). In rural areas, it is even the main reason for less access to health services by children.

“We did not go to the doctor, because we were afraid of being infected with something even worse.”

Female, 47-year-old temporary worker taking care of her grandson, low-income, rural

In a small number of cases, respondents in rural areas have also reported fear of being suspected of having COVID19 if they visit doctors.

“We were afraid to go to public medical facilities. My brother called a doctor saying that he had fever, then the whole village told us that we had COVID, nobody talked with us anymore, and they were looking at us as enemies. They were avoiding us. It was awful. And there was no COVID infection! They just assumed it was the case.”

Female, 47-year-old temporary worker, taking care of her grandson, low-income, rural

Another reason for poor access to health services, cited by 31 per cent of the respondents and 46 per cent of those living in rural areas, is the difficulty moving around due to the restrictions. Some respondents, especially these living below the poverty line, report the cost of paying for health services or transportation as a barrier. COVID19 has resulted in increased health costs for many households who have had to resort to private clinics, procure medicines in anticipation of symptoms or to buy protective equipment. Where health insurance exists in the Republic of Moldova, it does not always cover the costs of medicine after hospitalization.

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Figure 33. Access to health services since COVID19

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“We were afraid to go to public medical facilities. My brother called a doctor saying that he had fever, then the whole village told us that we had COVID, nobody talked with us anymore, and they were looking at us as enemies. They were avoiding us. It was awful. And there was no COVID infection! They just assumed it was the case.”

Female, 47-year-old temporary worker, taking care of her grandson, low-income, rural

Another reason for poor access to health services, cited by 31 per cent of the respondents and 46 per cent of those living in rural areas, is the difficulty moving around due to the restrictions. Some respondents, especially these living below the poverty line, report the cost of paying for health services or transportation as a barrier. COVID19 has resulted in increased health costs for many households who have had to resort to private clinics, procure medicines in anticipation of symptoms or to buy protective equipment. Where health insurance exists in the Republic of Moldova, it does not always cover the costs of medicine after hospitalization.

Figure 33. Access to health services since COVID19

Access to health services for children has decreased for 37 per cent of the households since the pandemic (Figure 33). Difficulties accessing health services have been more acute in urban areas (44 per cent report decreased access, compared with 30 per cent in rural areas), in the north (44 per cent decreased access) and in Chișinău (42 per cent).

“They programmed us [set a doctor’s appointment] in three weeks — it’s not normal. A lot can happen during this period. You meet a doctor when you need it, which is now, not in three weeks!”

Female, 39-year-old bookkeeper, 1 child, middle-income, urban

“Our daughter had problems with her teeth and needed surgery, but it was postponed.”

Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“The doctors in the clinics were too tired and the family doctors were not available, except online. We could not address to doctors during that period, although there were reasons to.”

Female, 33-year-old, unemployed, 1 child and taking care of her 3 nephews while their mother is abroad, middle-income, rural

One of the main reasons for reduced access to health services has been the unavailability of health professionals, who have been overwhelmed dealing with COVID19 patients (cited by 52 per cent of the respondents reporting less access to health services for their children; see Figure 34). Some scheduled appointments have been postponed, and some have been hard to reschedule.

Another important reason for the lower access to health services has been the fear of coronavirus infection, reported by 41 per cent. This belief is particularly strong in rural areas and among respondents living below the poverty line (cited by 49 per cent). In rural areas, it is even the main reason for less access to health services by children.

“We did not go to the doctor, because we were afraid of being infected with something even worse.”

Female, 47-year-old temporary worker taking care of her grandson, low-income, rural

In a small number of cases, respondents in rural areas have also reported fear of being suspected of having COVID19 if they visit doctors.

“We were afraid to go to public medical facilities. My brother called a doctor saying that he had fever, then the whole village told us that we had COVID, nobody talked with us anymore, and they were looking at us as enemies. They were avoiding us. It was awful. And there was no COVID infection! They just assumed it was the case.”

Female, 47-year-old temporary worker, taking care of her grandson, low-income, rural

Another reason for poor access to health services, cited by 31 per cent of the respondents and 46 per cent of those living in rural areas, is the difficulty moving around due to the restrictions. Some respondents, especially these living below the poverty line, report the cost of paying for health services or transportation as a barrier. COVID19 has resulted in increased health costs for many households who have had to resort to private clinics, procure medicines in anticipation of symptoms or to buy protective equipment. Where health insurance exists in the Republic of Moldova, it does not always cover the costs of medicine after hospitalization.
“My husband’s cousin worked at the open market, selling tea. She got sick and it turned out to be the COVID19. It was a very serious situation, it lasted more than two weeks. She was connected to the ventilation device. And even now she is not feeling well. Rehabilitation is very difficult, she is hardly recovering. They had the hospital paid for by the insurance, but some of the medicines they had to buy themselves once she left hospital are not going to be reimbursed.”

Female, 38-year-old owner of a beauty salon, 2 children, middle-income, rural

The long-term consequences of the decrease in access to health services, which was particularly acute during the lockdown, is worrying in the long term. Some respondents admit having postponed vaccinations for some of their children. An improvement in the availability of doctors would not necessarily solve the issue since some respondents are now afraid of sending their children to medical facilities (even for vaccination) as they fear doctors might be infected.

Local public authorities worry about the impact of the lack of monitoring of other diseases such as tuberculosis during the peak of the pandemic. They fear a surge in these diseases.

“We had to go to the doctor for a check-up with my daughter, but postponed. The same for a vaccine.”

Female, 28-year-old housewife, 1 child, low-income, rural

“Some vaccines were needed and were not administered on time. Now they can be done, but I wonder if it is worth it, as there is a risk of being infected inside the medical facilities, because many doctors are infected.”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

Another negative aspect of the pandemic is that the detection and monitoring of other diseases has been reduced to zero. For example, we face difficulties finding and treating tuberculosis for children. We expect that in the coming months we will have a significant increase in cases.”

One of the heads of the Health, Social Protection and Education Departments, Balti

4.4 Impact on overall well-being

Children’s overall well-being has been heavily affected by the pandemic. If the situation was particularly critical during the lockdown, life is still not back to normal and there is a fear that new restrictions might come into force at any time.

Close to one third of children have had to discontinue their leisure activities. This was initially due to the closing of all sports and arts facilities during the lockdown, but it may continue as families cut down on expenses. The lack of leisure activities has had a strong impact on children’s well-being as many have been stressed and lacked activities to express themselves.

“Boxing trainings were postponed. There was only some general physical training online. I tried to train him at home, but it was not as efficient as with the coach. Now it has resumed, but he has not yet reached his pre-COVID19 level.”

Male, 40-year-old soldier, 2 children, middle-income, urban

“Our daughter did gymnastics online. It is not so interesting but she followed the sessions. She also used to go to painting school but the classes were interrupted, same for the English lessons.”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“Our daughter had to suspend her hobbies, courses and other activities. It was stressful for her. She had nowhere to go, and no means to realize herself. She used to practise painting, theatre – but all was closed. This impacted her mental health a lot.”

Female, 39-year-old bookkeeper, 1 child, middle-income, urban

Figure 34. Reasons for children’s lesser access to health services since COVID19

Note: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 193 (overall); N = 117 (urban); N = 76 (rural); N = 21 (below the poverty line)* N = 120 (central); N = 129 (south); N = 148 (Chișinău), only respondents who experienced lesser access to health services and excluding those who did not need access to health services

* Small sample size
“Our son didn’t go to his favourite dance classes. This was a stress for him. He also said, ‘I want to go to school, I want the school to open.’ It was very hard to stay home so long.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

Without the possibility of leisure activities, or of going to schools and public places, many children have suffered from the lack of activities and social life. This has been particularly acute in cities, were families live in apartments.

“It was very difficult with our children at home. They always wanted to go outdoors – they were bored staying so long at home – and always wanted something new. There was such tension between me and them. It was like a constant struggle, it drove me crazy at times. We stayed in town for two weeks, then we went to the countryside and it became easier for us. I don’t know what it would be like if we had continued staying in town.”
Female, 28-year-old social worker, 2 children, low-income, urban

“No play, no fun, no communication, longing for friends, missing educators, all this were for the little one! The older one is more reserved but still felt the lack of communication. Before, she could go out, go for a walk, go to parties, practise some activities, but she was she was deprived of all this at once. The children were stressed, they were even afraid of life.”
Male, 41-year-old teacher, 2 children, middle-income, rural

“It was very difficult to adapt. My six-year-old boy is very energetic. He couldn’t go out to play, he always got angry, he talked for hours on the phone with friends. Lack of communication was a big problem.”
Female, 33-year-old, unemployed, 1 child and taking care of her 3 nephews while their mother works abroad, middle-income, rural

To compensate, and out of boredom, many children have resorted to spending time on their phone or on the computer, which has greatly dissatisfied their parents or caregivers.

“All activities were done on the computer. Additionally, he got involved in some games. I am not happy at all.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“No communication with friends, and a lot of time with the computer. She had to suspend her hobbies, courses and other activities. It was stressful for her. She had nowhere to go, and no means to realize herself.”
Female, 39-year-old bookkeeper, 1 child, middle-income, urban

“Definitely, my child spends less time outdoors. He is home with his phone and with the tablet all the time. This is not good at all.”
Male, 29-year-old sales agent, 1 child, middle-income, urban

“Children were affected psychologically because of lack of socialization and not being able to go out. They were locked in the house with the computer and the tablet all day long.”
Male, 46-year-old sales agent, 1 child, middle-income, urban

Eight per cent of the families report tensions in the household generating more stress for the children. This has been the case in particular for families with financial difficulties, such as because the main income-earner has had to return to the Republic of Moldova.

“Of course, there were misunderstanding and tensions. When there is no money, the parents are nervous. Children feel all these without asking what happens.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

“The situation is tensed in the family. Parents are affected, stressed. No work, no money, uncertainty with the future. Everybody becomes more nervous.”
Female, 37-year-old housewife, 1 child, low-income, rural

“There were no earnings. And the perspective was not quite clear. When there is only one person who brings income and this person stays at home, everybody feels this uncertainty. This affects the whole family.”
Male, 29-year-old musician who used to work in Romania before the pandemic, 1 child, middle-income, urban

Worryingly, local public authorities report higher cases of child neglect and domestic violence.

“Another negative impact is the higher number of suspected cases of child neglect and domestic violence. The police reports that the number of complaints regarding domestic violence has highly increased. This is probably caused by family tensions, due to spending too much time together.”
One of the heads of the Health, Social Protection and Education Departments, Balti

Looking at differences by segments, urban children have been more likely to have to stop their leisure activities (37 per cent) than their rural counterparts (25 per cent) – see Figure 35. This can be explained by higher underlying rates of activities among urban children, but also stricter restrictions in urban areas compared with rural ones. Rural children, however, have been more likely than urban ones to suffer reduced access to necessary hygiene products and clothes.

On a brighter note, local public authorities are expecting the return of migrant parents to have a positive effect on children, including in terms of emotional well-being but also in terms of care and access to health services.
“We want to believe that the return of parents will also have a positive impact on their relationships with their children. This weekend, in partnership with a number of NGOs, we are planning a training session for children with tuberculosis. [...] The children left alone at home had complications with access to health services during the pandemic. Also, for example, caregivers, especially the elderly, sometimes refuse to give children the planned vaccines. A serious problem has been observed with children with tuberculosis. Caregivers do not want children to start treatment, they do not want to take responsibility for treatment. Another difficulty is encountered by children with insulin-dependent diabetes. Caregivers, especially the elderly, are not keen to inject insulin.”

One of the heads of the Health, Social Protecion and Education Departments, Balti

4.5 Perspectives for the coming months and years

Moldovan parents feel that their children have been very much impacted by the pandemic, notably in terms of access to education (70 per cent), and overall well-being (48 per cent) — see Figure 36. Worryingly, they believe that the situation is likely to worsen: 39 per cent believe that their children’s health is going to be affected by the crisis (compared with 15 per cent saying their health has been affected today). They expect their children to further suffer in terms of overall well-being, access to education, to nutrition, and to water, sanitation and hygiene (WASH). These pessimistic views are shared by all segments of the population and in similar proportions.

Many parents believe that new restrictions will be imposed on schools and that the government will resort to online learning again, which they do not trust. They are afraid that an entire generation will become poorly educated, which would render the Republic of Moldova even more vulnerable.

“I have already heard that schools will be closed early. If so, education will be ruined as online studying is not studying at all. This is a parody of learning.”

Male, 29-year-old musician, 1 child, middle-income, urban

“This generation deteriorates. They lose their sense of responsibility due to the quality of online studying. In the future, we will find ourselves with poorly educated people, who will be easier to manipulate. What can be done? Only to get things back to normal. Only that.”

Female, 32-year-old teacher, 1 child, middle-income, rural

“Our children suffered from lack of communication with their father. He could not come to Moldova for fear that he would not be able to go back.”

Female, 38-year-old husband working in construction in Ireland, 1 child, middle-income, urban

“My husband did not return home for fear that he would not be able to go back to Germany.”

Female, 41-year-old husband working at a delivery company in Germany, 2 children, low-income, urban

“My husband is abroad in England. He works in construction. He doesn’t plan to stop working abroad. He was supposed to come for the holidays in the spring, but did not come, because he feared that he could not go back.”

Female, 26-year-old housewife with husband working in construction in the United Kingdom, 1 child, low-income, rural

Another consequence of the pandemic that is likely to continue to impact children’s well-being is travel restrictions. Migrant parents used to come back home once or twice a year for holidays to spend time with their families. With the pandemic and travel restrictions imposed by many host countries, many migrant workers do not dare to travel to the Republic of Moldova out of fear of not being able to travel back. Many children of migrants who already suffer from the absence of their parents all year-long are being even more impacted emotionally.
Figure 36. Impact of COVID19 on key services now and in the future / ppts = percentage points; WASH = water, sanitation and hygiene

Notes: Future change compared with current situation; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 981 to 1,010 (nutrition); N = 931 to 945 (education); N = 944 to 1,009 (health); N = 980 to 1,007 (WASH); N = 969 to 1,008 (overall well-being); excluding “do not know” answers and participants refusing to answer on some variables

If migrant workers are not coming back, even during holidays, it is also because many cannot afford to, as families are more than ever in dire need of remittances. Those who have lost their jobs abroad and came back to the Republic of Moldova are willing to re-migrate as soon as possible to support their families. Many have tried to find a job in the Republic of Moldova, but this has been difficult and they are more hopeful of finding jobs abroad.

“Here in Moldova, I don’t think he can find a job. It doesn’t make sense staying here with such low salaries.”
Female, 26-year-old husband working in the United Kingdom in construction, 1 child, low-income, rural

“My husband will not return. He left Moldova after the Christmas and he is not planning to return home. There is no work here. Our family cannot afford it.”
Female, 39-year-old housewife, 2 children, low-income, rural

“I don’t think my husband will come back. He is the main source of income for the family. If the situation does not change, he has nothing to return for. Here in Moldova, expenses are too high, and salaries are too low. We will not survive.”
Female, 38-year-old owner of a beauty salon with husband and mother working abroad, 2 children, middle-income, rural

Overall, almost 3 out 4 migrant workers belonging to households with children plan to remain abroad (65 per cent planning to stay in their current host country and 9 per cent planning to move to another country — see Figure 37).

The economic situation in the Republic of Moldova is considered uncertain because of the consequences of the pandemic. The return of migrant workers will put pressure on the Moldovan labour market, while vulnerable families who used to rely on remittances will become even more vulnerable. This is likely to result in reduced domestic consumption, further amplifying the economic crisis.

“No doubts, my husband will not return. This is our only source for me and our two daughters. Otherwise, we won’t survive. The state helps us with nothing.”
Female, 41-year-old husband working at a delivery company in Germany, 2 children, low-income, urban

“My husband returned from Russia due to the pandemic. If for several months the situation continues, I think we will try and live abroad both, but this time in the EU.”
Female, 43-year-old with husband recently returned from the Russian Federation, where he was working in construction, 2 children (including 1 under 18 years of age), low-income, rural

“My husband returned in March. He tried to find a job here in Moldova, but it was problematic. Most probably, he will go abroad again, when the situation becomes more normal.”
Female, 28-year-old, with husband recently returned from Portugal, where he was working at a meat factory, 1 child, low-income, rural

“Maybe my husband will come back. My husband returned from the Russian Federation where he was working in construction, 2 children (including 1 under 18 years of age), low-income, rural

“Here in Moldova, I don’t think he can find a job. It doesn’t make sense staying here with such low salaries.”
Female, 41-year-old husband working at a delivery company in Germany, 2 children, low-income, urban

“My husband will not return. He left Moldova after the Christmas and he is not planning to return home. There is no work here. Our family cannot afford it.”
Female, 39-year-old housewife, 2 children, low-income, rural

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The economic situation in the Republic of Moldova is considered uncertain because of the consequences of the pandemic. The return of migrant workers will put pressure on the Moldovan labour market, while vulnerable families who used to rely on remittances will become even more vulnerable. This is likely to result in reduced domestic consumption, further amplifying the economic crisis.
Many local workers are in fear of losing their jobs, which means that the crisis could also severely impact households not relying on remittances. These economic difficulties are likely to create additional challenges in terms of the mental health of the population, violence and crimes.

“The COVID19 pandemic will have a considerable socioeconomic impact in the Republic of Moldova in the coming years, and migration will be a decisive factor in this regard. Several major issues can be highlighted, such as: High level of unemployment among Moldovan citizens living and working abroad due to the COVID19, which leads to an increase in the rate of return of Moldovan migrant workers, which in turn creates additional pressure on the internal labour market; Migration trends in Moldova have created a group of vulnerable citizens separated from their families who have gone abroad to work, and who are now deprived of their main source of income; Lack of skilled workers in Moldova, such as health and education professionals, which will have a major impact on the recovery after COVID19; The economic growth of the Republic of Moldova is mostly fuelled by domestic consumption, which in turn is supported by financial remittances, which also contributes to tax revenues. These financial flows will decrease due to the socioeconomic impact of COVID19.”

Interviewee at the Department of Social Assistance and Family Protection, Cimișlia

Families express their worries for the immediate future. Many have been able to survive so far by tapping into their savings, a resource that is now almost exhausted for many. Families are also afraid of not being able to make ends as extra winter expenses fall on them.

“Winter is coming – additional expenses like heating will add to our daily expenses. I think times to come will be even more difficult. I would like to be optimistic, but our financial situation tells me otherwise. […] We are almost exhausting our savings.”

Male, 41-year-old teacher, 2 children, middle-income, rural

“It will get worse. All over the country. Even very bad. Poverty increases, people lose hope. People are desperate. Especially those from the villages.”

Female, 32-year-old city council employee, 2 children, middle-income, rural

“The situation with the COVID19 made me for the first time in my life think about leaving Moldova together with my family. I even asked myself, ‘Why are we still in Moldova?’ For some of my acquaintances, the COVID19 was the last drop, which made them decide to emigrate from Moldova. There is a lack of respect from the state and from the government vis-à-vis small and medium businesses that paid taxes. Now, when come the difficult times, the state helps us with nothing. We feel abandoned!”

Male, 29-year-old business owner in the entertainment industry, 2 children, middle-income, urban

“I’m sorry I can’t leave this country. But I would like to.”

Female, 41-year-old, with husband working at a delivery company in Germany, 2 children, low-income, urban

“The fact that money does not come from abroad in the country as before will affect us all, even the ones who do not receive the money directly. For the economy in general, it is very bad.”

Male, 46-year-old sales agent, 1 child, middle-income, urban

“Things will get worse. Considering the fact that till now we have had some savings, that we have almost exhausted, we are likely to regress.”

Female, 32-year-old city council employee, 2 children, middle-income, rural

“It will get worse. Savings are decreasing. We will not be able to afford what our children need. I can only count on what my husband will earn abroad.”

Female, 37-year-old housewife, 1 child, low-income, rural

Note: Intentions for the next six months; survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 299 (households with migrant workers only); excluding “do not know” answers and participants refusing to answer on some variables.
“Undoubtedly, the situation will worsen. We [have not] sufficiently invested in mental health services and in the protection for the victims of violence. I expect crimes will increase as well.”

Interviewee at the Directorate for the Protection of the Rights of the Child, Buiucani Sector

“The company where I work [car wash] already has big losses. I hope this gets resolved soon and that I will not be fired, but this is not guaranteed.”

Male, 32-year-old employee at a car wash, 1 child, middle-income, urban

“The situation will worsen. My husband may lose his job. He works for an international company in the IT sector and they have already fired some employees. Due to the pandemic, they lost some important clients. As for me, I am a private accountant. Many businesses among my clients have closed down and my income has decreased. There are delays in getting paid as well.”

Female, 39-year-old accountant, 1 child, middle-income, urban

“Regardless of the pandemic, in our country everyone faces the risk of losing his job. In my case, it is possible – I am in the trading sector. I can definitely be fired.”

Male, 46-year-old sales agent, 1 child, middle-income, urban
CONCLUSIONS AND RECOMMENDATIONS

These research conclusions and recommendations aim to help central and local authorities to mitigate the impact of the coronavirus disease (COVID-19) crisis on families with children in the Republic of Moldova. The expectations voiced by the research participants are presented first, followed by the main research conclusions and a set of recommendations based on the research and on an international benchmarking of the mitigation plans adopted in Romania, the Russian Federation and Ukraine (see Appendix 2).

5.1 Research participants’ expectations for the government

Most research participants have limited expectations from their government.

“For families with children, I don’t really trust the government will do anything. Only parents will take care of their children. I have no expectations.”

Male, 41-year-old teacher, 2 children, middle-income, rural

“The situation in the kindergarten has been very exaggerated. Kindergartens have to open. No one can take care of my children during the day and I need to work until my husband leaves abroad.”

Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

“Removing restrictions for children is very important. The best thing the government can do is to leave us alone. Let us deal with our lives on our own and we will be able to support our children.”

Female, 30-year-old housewife, 1 child, low-income, urban

Another frequent request is for the government not to reintroduce lockdown, so that small businesses can continue working. Many entrepreneurs would also like to receive more punctual support from the state to sustain them during this period, helping them to maintain jobs and continue paying taxes, in turn reducing the extra support needed from the state to support their families.

“I think, it was a mistake to force everyone to stay at home. For those who work or manage a private business, it was a catastrophe. They were left without income, and the state provided them with nothing.”

Male, 41-year-old teacher, 2 children, middle-income, rural

The main request families express is to go back to normal life – reopening schools and kindergarten so that parents can get back to work and earn money. If this happens, many research participants declare they will not need any specific support from the state. Most parents do not fear sending their children back to school.

“I expect the government to bring things back to normal – that is kindergartens to be opened normally, so that children are safe. This will allow me to work normally, and then I won’t depend on anyone to support me. Allow me to work normally, as before. That’s it…”

Female, 32-year-old city council employee, 2 children, middle-income, rural

“The best thing the government can do for us is to give us the opportunity to take care of our children ourselves. They need to open completely kindergartens and schools, to let us earn money to support our families.”

Female, 28-year-old social worker, 2 children, low-income, urban

“I think, it was a mistake to force everyone to stay at home. For those who work or manage a private business, it was a catastrophe. They were left without income, and the state provided them with nothing.”

Male, 41-year-old teacher, 2 children, middle-income, rural
If life cannot go back to normal and restrictions cannot be lifted, most Moldovans expect the government to compensate for the induced loss of income for which they are not responsible.

“The government should help us maintain our business, and we will help the state in return with the taxes we pay. We will then be able to support our families ourselves, without any additional help.”
Male, 46-year-old employee in the financial sector, taking care of 2 children under 18 years of age, middle-income, urban

If people cannot keep their jobs, at least a percentage of the salaries should be paid till the pandemic ends. It is not our fault that many businesses had to close due to the restrictions.

“Something needs to be done so that people can keep their jobs. At least a percentage of the salaries should be paid till the pandemic ends. It is not our fault that many businesses had to close due to the restrictions.”
Female, 38-year-old housewife, 1 child, middle-income, urban

The poorest citizens with children would also welcome exceptional financial support from the state to help them cope with the crisis. This could take the form of vouchers, subsidies or direct cash transfers. Others are calling for an extension of child allowances until children reach 18 years of age.

“Financial support for families with children is needed. They should receive vouchers to buy foods or products at discounted prices.”
Male, 34-year-old recently returned from France, where he was working in construction, 4 children, low-income, urban

Some Moldovans expect the state to provide more support in procuring protective equipment such as masks. They would welcome increased price control on medicines and extended coverage of all medicines by their health insurance.

Specific measures for returning migrants are requested by most of those concerned. As these people come back to the Republic of Moldova without a job but with skills, they should be given social aid first and then offered facilities to open a new business in the country.

“No one around me has received anything, even a ticket for food. There could be some allowances for families with children, at least MDL50 per child.”
Female, 32-year-old city council employee, 2 children, middle-income, rural

“We need financial support, especially in situations when parents stay home and don’t work.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

“Allowances should be for children up to 18 years. As in Romania.”
Female, 26-year-old housewife, 1 child, low-income, rural

Many Moldovans expect more support from the state and from the local authorities to implement sanitary procedures in schools: free soaps, antibacterial products and hot water to wash hands in winter. Some parents would welcome specific measures to increase the quality of food at schools to help their children stay healthy.

“People who return home in the context of COVID19 represent an opportunity for Moldova. Many return with skills and/or are willing to invest. National employment programmes, registration and other procedures need to be made simpler and more accessible. Returning migrants bring investment and create jobs. They should be helped financially and receive advice to open new businesses in Moldova. The current programmes, such as social assistance, will have to be extended to meet the demand from those who have returned.”
Interviewee at the Department of Social Assistance and Family Protection, Cimișlia

“First of all, the government needs to precisely assess the situation, for example in schools. It is simple to issue orders that leave all the responsibilities on the shoulders of the teachers or the parents. Most of the orders received from the ministry are simply not practicable.”
Female, 32-year-old teacher, 1 child, middle-income, rural

“The state must provide quality food to children in schools and kindergartens to keep their immunity strong.”
Male, 30-year-old educator who used to work abroad before COVID19, 1 child, middle-income, rural

“The state should provide schools with hot water for the children to wash their hands, as winter soon comes.”
Female, 37-year-old housewife, 1 child, low-income, rural

“The government should open the borders and facilitate travel. If the state cannot create good conditions from employment, there should not be any restrictions for people who want to leave the country.”
Female, 41-year-old housewife, 2 children, low-income, urban

“Financial support for families with children is needed. They should receive vouchers to buy foods or products at discounted prices.”
Male, 41-year-old teacher, 2 children, including 1 under 18 years of age, middle-income, urban

“People who return home in the context of COVID19 represent an opportunity for Moldova. Many return with skills and/or are willing to invest. National employment programmes, registration and other procedures need to be made simpler and more accessible. Returning migrants bring investment and create jobs. They should be helped financially and receive advice to open new businesses in Moldova. The current programmes, such as social assistance, will have to be extended to meet the demand from those who have returned.”
Female, 43-year-old housewife, 2 children (including 1 under 18 years of age), low-income, rural

“Financial support for families with children is needed. They should receive vouchers to buy foods or products at discounted prices.”
Female, 28-year-old housewife, 1 child, low-income, rural

“Yes, we should receive allowances for children up to 18 and not up to 2 years old as it is the case now.”
Female, 28-year-old housewife, 1 child, low-income, rural

“The government should open the borders and facilitate travel. If the state cannot create good conditions from employment, there should not be any restrictions for people who want to leave the country.”
Female, 41-year-old housewife, 2 children, low-income, urban
“Creating decent jobs, raising living standards in the country, should be a priority. The allocation of material [resources] should be made in such a way that the local public administrations alone establish the priorities for investment. Child support services should be reinforced as well. Currently, in order for the social workers to reach the households, they use public transport, which consumes time and puts them at risk.”

One of the heads of the Health, Social Protection and Education Departments, Balti

Local public authorities, which are best placed to understand their communities’ needs, are requesting more power and financial means from the central government to act and to support people.

Households with children have trouble identifying the priority areas of intervention for government support. Needs are expressed highly in every area, although education and health come first – mentioned by 89 per cent and 88 per cent of the respondents, respectively (Figure 38).

“This weekend, in partnership with a number of NGOs, we are planning a training session for children with tuberculosis. They will also be offered 10 masks and 10 metres of special fabric to make masks at home.”

One of the heads of the Health, Social Protection and Education Departments, Balti

One of the heads of the Health, Social Protection and Education Departments, Balti

"The government should provide free medicines or subsidize them, or give access to free medical insurance.”

Male, 32-year-old employee at a car wash, 1 child, middle-income, urban

In terms of the ease of implementing specific COVID-19 measures, households found the lockdown the most difficult to follow as it generated family tensions. On prevention measures, 29 per cent of households say they have a lot of difficulty implementing them (Figure 39). On a more positive note, over two thirds of households say they have very easy access to reliable information sources on COVID-19.

“Very easy” means “very easy”; “Easy” means “easy”; “Neutral” means “neutral”; “Difficult” means “difficult”; “Very difficult” means “very difficult.”

Notes: Survey (August to September 2020) of 1,015 households with children in the Republic of Moldova (including 501 receiving remittances and 514 not receiving remittances); N = 996 to 1,007; excluding “do not know” answers and participants refusing to answer on some variables.
5.2 Research conclusions

The following 12 main conclusions can be drawn from this research.

1. All population segments have been impacted by the COVID-19 crisis. Moldovan households with children have lost 15 per cent of their income on average. All population segments (households receiving and not receiving remittances, living in urban and rural areas, with single child and multiple children, female-headed and male-headed, etc.) have been affected in similar proportions.

2. Households receiving remittances have had a slightly higher fall in household income than non-receiving households (a fall by 17 per cent versus 13 per cent), as remittances have fallen by 25 per cent on average. They are, however, more resilient than non-receiving households. The poverty rate among households not receiving remittances has increased by 8 percentage points to 33 per cent, compared with the rate for non-receiving households going up by 6 percentage points to 27 per cent.

3. The situation is very delicate for households whose migrant workers lost their jobs or had to return and who have therefore lost their main source of income. Twenty-five per cent of households with children have had a fall in remittances of more than 50 per cent, which has a very significant impact for households whose income is on average 62 per cent composed of remittances.

4. Local economic decline has been the main effect on households not receiving remittances (some have lost their jobs, could not work during the lockdown, work in a sector that has been heavily affected, etc.). This has a strong impact on these households, whose income is 87 per cent composed of salaries.

5. Moldovan households with children have faced an increase in expenses in addition to the falls in income. Households with children have had to spend more on food, utilities, health care, computer equipment, and so on.

6. As the COVID-19 crisis has impacted all population segments in similar proportions, those that were the most vulnerable before the pandemic continue to be the most in need – rural households and households with multiple children have been particularly affected. Children in general and women have also been particularly affected, with higher cases of child neglect and domestic violence in general reported by local public authorities.

7. To cope with the crisis, households with children have cut down on expenses, resulting in a lowering of their living standards. Some 58 per cent have had to cut down on essential expenses such as clothing and health care. Even meals have been cut back for 15 per cent of households.

8. In 30 per cent of households with children, children’s nutrition has been impacted by the crisis. One in five of households have not been able to offer as much variety in meals to children, 16 per cent have had to cut down on the nutritional value of meals (less meat, fish, dairy products, etc.) and 4 per cent even had to cut down on food quantities.

9. Many households have also resorted to coping mechanisms that are not sustainable (e.g. 22 per cent used their savings, 7 per cent sold assets, etc.).

10. There is a strong dissatisfaction with access to education during the pandemic. Despite efforts from schools, teachers and pupils, online education remains far from satisfactory. The quality of lessons is rated as low by parents and caregivers, and not all subjects are being taught online. Some families have not had enough devices for all their children to study. School closures have also prevented parents from working.

11. Thirty-seven per cent of households with children have had less access to health services. Many hospitals have been overwhelmed, and households are afraid that sending children to the doctors or hospitals will risk infection.

12. Local public authorities are fearing longer-term impacts on children’s health as a knock-on effect from prioritizing services to COVID-19.

5.3 Recommendations

The following table presents a set of recommendations for central and local authorities, based on the research conclusions and on an international benchmarking of policies in Romania, the Russian Federation and Ukraine (Appendix 2).

These recommendations aim to be equitable for all, and include specific recommendations concerning women. All segments of the population have been affected by the crisis, however, and from an equity perspective, no sector-specific recommendations are being made. The proposals are short-term recommendations to be implemented in the coming months while restrictions persist, and so aim to directly mitigate the impact of the crisis. Local public authorities should be given the power and means to implement these recommendations because they have the best awareness of communities’ needs.

<table>
<thead>
<tr>
<th>Policy</th>
<th>Context</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ensure Moldovan migrant workers abroad are protected</td>
<td>• Advocate that host countries ensure the rights of Moldovan migrants and prevent discriminatory measures leading to the expulsion of foreign workers</td>
<td>• Ensures that migrant workers, who often represent the main source of income of their households, keep their jobs abroad and can continue to support their families in the Republic of Moldova</td>
</tr>
<tr>
<td>Ensure travel in and out of the Republic of Moldova remains possible (as long as the health situation allows)</td>
<td>• Advocate that foreign countries ensure the Republic of Moldova is not unnecessarily placed on travel-ban lists</td>
<td>• Ensures short-term migrants, who often substantially contribute to the household budget, can continue to go abroad</td>
</tr>
<tr>
<td>Offer free COVID19 testing to migrant workers needing to travel</td>
<td>• Offer free COVID19 tests to migrant workers who can justify a job abroad and the need to present a negative test to travel to their host country</td>
<td>• Facilitates migration to maintain the inflow of remittances</td>
</tr>
<tr>
<td>• Allows migrant workers abroad to easily come back to visit their families and children, without risking being unable to return to their host country</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Allows migrant workers abroad to easily come back to visit their families and children, without risking being unable to return to their host country</td>
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</tr>
</tbody>
</table>
**Creation of a one-stop shop for returning migrants**

- Identify returning migrants on arrival and register them for basic needs support (food packages, utility bills subsidies, etc.), unemployment benefits or social aid, free or subsidized health coverage, etc.
- Supports returning migrants and their families, who, in addition to having one more family member to take care of, have often lost the main part of their household income.
- Ensures basic needs are guaranteed and supports migrants with the administrative procedures to get longer-term state support.

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**For households not receiving remittances**

**Deferral of tax and social contributions payments for companies witnessing a drop in income**

- Additional corporate income tax deductions for the companies witnessing a 25% drop in their revenue (year-on-year for quarter two of 2020) but maintaining their number of employees during the emergency state.
- Permission to carry over fiscal losses (currently losses can be carried forward only for the following five years).
- 0% rate corporate income tax applied for the reinvested income of the companies.
- Introduction of special rules to allow deduction of bad debts for tax purposes.
- Companies will get assistance and avoid major financial issues, including lack of working capital and logistical issues.
- There may be a short-term fall in government income; however, in the absence of these measures, company bankruptcies would also affect income in the longer term.

**Credit payment deferral for micro, small and medium-sized enterprises (MSMEs)**

- 6 months (Oct 2020 – March 2021) credit payment deferral for micro enterprises in hospitality.
- 6 months (Oct 2020 – March 2021) credit payment deferral for micro-enterprises in all the economic sectors (apart from hospitality) for loans essential for activity (paying salaries, providing working capital).
- 6 months (Oct 2020 – March 2021) credit payment deferral for small and medium-sized enterprises (SMEs) in all sectors, provided their monthly revenue dropped by more than 25% between March and June 2020, compared with the same period in 2019.
- Companies, especially those in the areas most impacted by COVID19, benefit from the measure by using their incomes exclusively for paying salaries and running their business.

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**Providing preferential interest loans and governmental guarantees for MSMEs**

- Governmental guarantees (up to 80%) and zero-interest loans for micro-companies in hospitality, limited to €300 a month per employee and capped at €2,500.
- Governmental guarantees (up to 80%) and preferential-interest loans for those SMEs in hospitality (apart from micro-enterprises), transportation and storage, light industry, wholesale and retail (non-food) and agriculture that has a revenue drop larger than 25% between March and June 2020, compared with the same period in 2019.
- Together with the deferral of tax and social contributions payments and credit payments deferrals for MSMEs (see recommendations above), awarding preferential-interest loans and governmental guarantees to MSMEs would complete the package of measures to support Moldovan companies, particularly MSMEs, in the sectors most impacted, to overcome the significant financial difficulties.

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**To mitigate the increase in households’ expenses**

**Ensure school meals remain available for children or that school meal allowances are reallocated to parents and caregivers**

- Keep school restaurants open, even if schools are closed (and stagger lunch times to avoid all children eating at the same time).
- Allow children to visit school restaurants even if they do not have physical lessons at school on that day.
- When school restaurants cannot remain open, redirect schools’ food allowances to households.

**Impose price ceilings on health products and services**

- Similarly to the Russian model, conduct negotiations with suppliers of health products (medicines, protective equipment, essential hygiene items, services provided in private clinics, etc.) to allow the state to introduce price ceilings, should average prices for such items increase by more than 30% over the course of a month.
- Guarantees that Moldovan households with children can implement the recommended protective measures.

**Moratorium on cutting access to utilities**

- Stop sanctioning late payment of utilities bills with suspended access.
- Ensures households with children have access to utilities, especially during winter and while some might struggle to pay their bills on time.

**Temporary capping of prices**

- Temporary capping of utilities prices to the three-month average pre-pandemic.
- Protects households from bigger bills.
This research has focused on households with children. It complements a broader assessment of the impact of COVID-19 in the Republic of Moldova conducted by PricewaterhouseCoopers under the guidance of the United Nations Development Programme (UNDP), which aims to support the government in the design of a mitigation plan for the entire population.

In addition to the recommendations above, the following three can be drawn from the research for the broader COVID-19 mitigation plan of the Government of the Republic of Moldova.

1. Necessity to protect the most vulnerable households, many of whom are already struggling to meet their basic needs, including food. The research highlights that some households, notably those with multiple children and living in rural areas, are especially vulnerable. Coping mechanisms used to face the crisis include reductions in expenses and, worryingly for 15 per cent of households, cutting down on food. The mitigation plan should include specific measures to guarantee all citizens have their basic survival needs covered. Keeping school restaurants open, maintaining food distribution to children, and Internet connection needs should be prioritized by the government to better plan continuity measures impact on the population over time.

2. Additional research is needed to fill the knowledge gaps and, as the crisis continues, measure impact on the population over time.

   Further research is needed to precisely determine the number of children who cannot follow online lessons because of a lack of equipment at home, and how much it would cost to fix the issue. If equipment and Internet penetration is relatively high in the country, the dynamics around how equipment is used at home and the consequences on schooling have yet to be quantified. It is expected that households do not have enough devices for all members of the household. The impact of limited bandwidth on distance learning via online video lessons would also need to be assessed. Understanding these equipment and connectivity needs would help the government to better plan continuity of education for all.

   Additional surveys among Moldovan migrants would help to understand the impact of the crisis on short-term and seasonal migrations and would gauge the vulnerability of Moldovan migrants based on their country of migration.

   The mitigation plan will have to be flexible and to adapt to the reality experienced by Moldovans. It is therefore paramount to continue measuring the impact of the crisis over time and see how the situation is evolving. This research has highlighted, for instance, that some households have tapped and exhausted their savings and that many now worry about winter expenses. Continuing to monitor the situation will allow for efficient population assistance.

3. In the longer term — and should austerity plans be introduced after the crisis — do not cut support to the most vulnerable households. The findings from this research should continue to be leveraged by the government when planning for the post-crisis era. A fair proportion of households are extremely vulnerable and at risk of not meeting basic survival needs such as food. These most basic needs should be prioritized by the government.

   - Provide extra support to the poorest households with children (households with multiple children and in rural areas)
   - Prevent schools from closing as much as possible
   - Make sure lessons are available at different times and on different platforms
   - To support access to health
   - To support children's access to quality education
   - To support women and children at risk

   To support access to health
   - Awareness campaign to encourage parents/caregivers to send their children in need to health facilities
   - Awareness campaign on domestic violence and child neglect
   - Specific training of the police and other relevant social services on the issue of child neglect and domestic violence

   To support children's access to quality education
   - Provide pandemic compensation (through the Ajudat Social programme) by raising the minimum thresholds so as to cover up to 90,000 families with children, for a maximum of 26 weeks (6 months)
   - Provide specific training and instructions to police and local public authorities to identify and act in case of suspicion of domestic violence or child neglect

   To support women and children at risk
   - Helps around 15,000 incremental households fitting the criteria to rise above the poverty line and recovery better
   - Close schools only when strictly necessary; favour alternatives that maintain physical lessons even if restrictions apply (shorter lessons, smaller groups, etc.)
   - Broadcast school lessons on television or radio

   To support access to health
   - Launch a national awareness campaign explaining the measures to make health services COVID-secure, and outlining the risks of not getting vaccines or treatment
   - Launch a national awareness campaign on child neglect and domestic violence, including a toll-free number for victims to use
   - Provide specific training and instructions to police and local public authorities to identify and act in case of suspicion of domestic violence or child neglect

   To support women and children at risk
   - Gets children in need back to health facilities to avoid a longer-term impact of the crisis on children's health; ensures that children get their vaccinations and receive adequate treatment for disease
   - Protects women and children, who are particularly vulnerable during the pandemic
   - Raises awareness among concerned state workers to better protect women and children during the pandemic

   - School closures have many negative impacts on children and prevent parents (especially women) from going to work
   - Schools reopening positively impacts children's nutrition
   - Ask teachers to record lessons so that they can be accessed flexibly
   - Increases the possibility for children to follow lessons and offers alternatives to children who do not have the necessary equipment or an Internet connection

   Additional surveys among Moldovan migrants would help to understand the impact of the crisis on short-term and seasonal migrations and would gauge the vulnerability of Moldovan migrants based on their country of migration.
Appendix 1. Bibliography

The following are the main documents and databases covered by the desk review.


Appendix 2. International policy benchmarking

<table>
<thead>
<tr>
<th>Category</th>
<th>Topic</th>
<th>Target groups</th>
<th>Challenges encountered</th>
<th>International benchmark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Decreased family income</td>
<td>Salary decrease</td>
<td>Private sector workers in all sectors of activity</td>
<td>• People losing their jobs • Imposed unpaid leave during lockdown/ when employers face restrictions</td>
<td>• Quarantine declared a legal ground for claiming unemployment benefits • Unemployment benefits raised to the maximum level regardless of employment record or previous wage (until July 2020) • 75% of the salaries of employees facing technical unemployment are paid by the state (in firms having stopped their activities completely or partially, or lost 25% or more of their revenues, and who have obtained a certificate from the Ministry of Economy proving so)</td>
</tr>
<tr>
<td>Small entrepreneurs</td>
<td>Decrease in overall activity</td>
<td>• Dire cash flow situation • Additional protection measures introduced cumbersome to implement, hence impacting income</td>
<td>• Social security contributions exemptions for entrepreneurs • Credit holiday for small and medium-sized enterprises • Tax payment deferrals in the most affected sectors • Loan guarantees for firms • Six-month interest-free loans from the bank to pay salaries to employees (state covers for the interest) • People who cannot work from home (including the self-employed) are compensated for lost income • Exceptional subsidy equivalent to about €133 per employee, including for individual entrepreneurs whose activity was severely reduced • Reduction of 10% of the corporate income tax (in April 2020) • Extension of the state guarantee scheme for loans for small and micro-enterprises, and subsidized interest rates</td>
<td></td>
</tr>
</tbody>
</table>
### Larger companies

- Dire cash flow situation
- Exemption from having to pay social security contributions for entrepreneurs
- Tax payments deferrals in the most affected sectors
- Loan guarantees to help firms
- Six-month interest-free loan from the bank to pay salaries to employees (state covers the interest)
- Exceptional subsidy equivalent to about €133 per employee, including for individual entrepreneurs whose activity was severely reduced
- Reduction of 5% of the corporate income tax (in April 2020)

### Decrease in remittances

- Return to the Republic of Moldova of migrant workers, who are often the main income earners of their households
- Need for migrant workers to go back abroad to continue to support their families
- Despite restrictions for Ukrainian citizens to travel abroad for tourism the government granted special permission for Ukrainian seasonal workers in Europe, in agreement with the Governments of Germany and Finland
- Subsidy of 50% of the gross salary (up to the equivalent of about €512) for employers hiring Romanian citizens returning to the country after losing their jobs abroad (allowance available for one year, also valid when employing jobseekers over 50 years of age or under 30 years)
- Creation of a website to offer information and support to Romanian migrant workers abroad (https://diasporahub.ro)

### Falling into poverty

- The poorest (mainly rural households and households with multiple children)
- Very low income levels and increasing expenses at home

#### International benchmark

- Extension of the rights to the Guaranteed Minimum Income programme
- Unemployed parents and individual entrepreneurs with children receive one-off additional assistance: the equivalent of about €53 for a child under 6 years of age and of about €66 for children aged between 6 and 10 years
- For each child under 3 years of age, additional monthly benefit of the equivalent of about €55; for children aged between 3 and 16 years a one-off lump sum of the equivalent of about €110
- For children between 3 and 7 years of age in families below the poverty line, additional monthly payment equivalent to 50% of the regional subsistence minimum amount per child
- Automatic extension of unemployment benefits (for 3 months) and social benefits and entitlements (for 6 months)
- Exemption of import duties and VAT on certain medical supplies
- Tax exemption for medical and pharmaceutical products
- Price ceiling for drugs can be imposed by the government for 90 days should a 30% monthly increase occur
- VAT exemption on imported medical and sanitary products used to fight COVID-19

### Health

- Poorest households and households with pre-existing health conditions
- Costs of protective equipment (masks, antibacterial products, etc.), medicines, etc.
- Costs of hygiene products (soap, detergent, etc.)
- Costs of visiting private clinics
- Exemption of import duties and VAT on certain medical supplies
<table>
<thead>
<tr>
<th>Category</th>
<th>Topic</th>
<th>Target groups</th>
<th>Challenges encountered</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Utilities</strong></td>
<td>Poorest households</td>
<td>• Rising costs of utilities and fear of not being able to pay for them during winter • Administrative requirements to enrol in the Housing Utilities Subsidy programme simplified; plan to subsidize utility bills for certain segments of the population • Late payment of utility bills not sanctioned (Moscow and some regions only) • Temporary capping of utility prices to the average price during the 3 months preceding the pandemic</td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Children’s equipment and Internet for pupils</strong></td>
<td>Poorest</td>
<td>• Lack of equipment (in sufficient number) at home to study • Cost of Internet access • Quality of the Internet connection • Online classes for children broadcasted on the YouTube channel of the Ministry of Education, the National Public Broadcasting Company and 10 other television channels</td>
</tr>
<tr>
<td></td>
<td><strong>Equipment and Internet for teachers</strong></td>
<td>All teachers</td>
<td>• Lack of (working) equipment • Lack of digital skills • Lack of pedagogical skills to teach online • Cost of Internet access • Development by the Ministry of Education and Research and the Institute for Education Sciences of a crowdsourcing platform to provide teachers and pupils with digital skills and useful resources to teach/learn from home (<a href="https://digital.educred.ro">https://digital.educred.ro</a>)</td>
</tr>
<tr>
<td></td>
<td><strong>Quality of education</strong></td>
<td>All</td>
<td>• Bad quality of online learning • Schools reopened; only universities continue to resort to online learning • Kindergartens and after-school activities reopened since 15 June; schools reopened since 14 September with online learning in the most affected areas</td>
</tr>
<tr>
<td><strong>Children’s health</strong></td>
<td>Safety in health facilities</td>
<td>All, especially rural and poor</td>
<td>• Fear of visiting health facilities because of the fear of being infected • Medical personal involved in fighting COVID 19 to receive a 200% monthly salary increase during the epidemic • Salary increase for medical personnel (doctors, nurses, ambulance drivers, etc.) working with COVID 19 patients as well as early retirement opportunities • Additional payments (bonus, extra hours, etc.) paid to medical staff working with COVID 19 patients exempted from personal income tax • Bonuses of €500 a month for medical staff in direct contact with COVID 19 patients</td>
</tr>
<tr>
<td></td>
<td>Lack of available doctors</td>
<td>All doctors and medical personnel</td>
<td>• Lack of available doctors</td>
</tr>
<tr>
<td></td>
<td><strong>Costs of private clinics</strong></td>
<td>All</td>
<td>• Costs of consultations in private clinics</td>
</tr>
<tr>
<td></td>
<td><strong>Costs of protective equipment and medicines</strong></td>
<td>All</td>
<td>• Costs of protective equipment and medicines</td>
</tr>
<tr>
<td></td>
<td>Monitoring of other disease</td>
<td>All children</td>
<td>• Difficulty to monitor the development of other diseases such as tuberculosis • Recruitment of 2,000 extra medical staff (doctors and ambulance professionals) to relieve pressure on the health system</td>
</tr>
</tbody>
</table>
Appendix 3. Ethical considerations

The strictest ethical standards were applied during the research. All research team members (enumerators, the moderator, field team managers and consultants) were specifically trained on ethics and requested to apply the research ethics protocol, which included the following:

- Providing respondents with full information on the research and its purposes (who is conducting the research, for whom, what the objectives are, how and why participants have been selected, etc.).
- Informing respondents about their rights: they can refuse to participate in the research and this will not affect them in anyway; they can stop the interview/focus group discussion at any time; they can refuse to answer some questions without having to provide any reason for it, etc.
- Collecting informed consent from all participants: as the research (including focus group discussions) was conducted remotely, consent was provided under the form of oral recorded consent.
- Guaranteeing anonymity (for the quantitative research and confidentiality (for both the quantitative and qualitative research) to all participants. Quantitative respondents were never asked for their name or any other personal detail that would allow for their identification. Participants in focus group discussions were asked for some personal details to allow the recruitment of specific socio-demographic profiles but not for more details than were strictly necessary for the research. All respondents were guaranteed full confidentiality: only the research team had access to the raw data collected and all team members were working under confidentiality agreements.
- Applying the European Union’s general data protection regulation when designing the research methodology and questionnaire/guidelines as well as storing and analysing the data. The main principles include:
  - Pseudo-anonymization of all qualitative data (focus group discussion transcripts) and anonymization of all quantitative data (quantitative database)
  - Lawful, fair and transparent processing of personal data
  - Processing of data for limited purposes and in an appropriate way
  - Processing of data in adequate and relevant ways that are not excessive for the purpose
  - Accurate processing of data
  - Data not kept longer than necessary for the purpose
  - Data processed in line with data subjects’ rights
  - Secured storing and processing of data
  - Data not transferred to people or organizations without adequate protection

Enquiries about data protection at Altai Consulting can be sent directly to: dataprotection@altaiconsulting.com.

Sources


More details on the computation of the poverty line are available at https://statistica.gov.md/public/files/Metadata/alt/Methodologie_sarachie.pdf. Based on data from the National Bureau of Statistics of the Republic of Moldova (the usually resident population was 2.869m in 2014 and 2.641m in 2020).


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