I. **Introduction**

1. This report is submitted by the Centre for Medical and Social Rehabilitation for People with low vision “LOW VISION” (further referring as “Low Vision”) and presents the main issues of concern related to respect, protection and fulfilment of the rights of persons with disabilities, especially the persons with vision disabilities, as well as the needs for further facilitating the process of inclusion of persons with disabilities. The report covers the issues of ensuring access of persons with visual disabilities.

II. **Information about submitting stakeholder**

2. “Low Vision” is a nongovernmental organisation, created in 2009. The mission of the organization is to deliver medical and social rehabilitation services to people with visual disabilities (impairments) by offering optical correction devices and contributing to changes in the governmental policies related to the rights of persons with disabilities. The objectives of the organization are directly correlated with the responsibilities of the Government of the Republic of Moldova to provide persons with disabilities with assistive devices and technologies, in accordance with the provisions of the Law Nr. 60 from 30.03.2012 on social inclusion of persons with disabilities. LOW VISION Centre is the unique provider of assistive devices and technologies for visually impaired for the hole country.

3. Since its’ creation, “LOW VISION” Center has provided services for more than 10,000 persons with visual impairments, of which 1/3 are children. All patients received free specialist consultations and optical correction and visual aid devices (magnifiers, telescopic systems, electronic video magnifiers etc.). More information on the web page: [http://www.lowvision.md/](http://www.lowvision.md/), facebook.- lowvisionmoldova.

III. **Level of implementation of recommendations from the 2nd UPR cycle**

Below is presented the analysis of part of recommendations that are connected directly or indirectly to the activity of the organization.

4. **Recommendation nr. 121.154 Boost the approval of the legislation oriented to guarantee the autonomy of people with disabilities to improve their social inclusion (Costa Rica). The recommendation is partially implemented.** Since the last review, two relevant policy documents that if fully implemented would contribute to guaranteeing the autonomy of people with disabilities to improve their social inclusion: National Programme on Social Inclusion of Persons with Disabilities for the period 2017 – 2022¹ and National Programme on Deinstitutionalization of Persons with Intellectual and Psycho-social Disabilities from

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¹ The Programme can be accessed at the following link: [https://www.legis.md/cautare/getResults?doc_id=101863&lang=ro](https://www.legis.md/cautare/getResults?doc_id=101863&lang=ro)
5. **Recommendation nr. 121.162** Ensure the right of persons with disabilities to live independently through the development of a national action plan for deinstitutionalization and for the inclusion of persons with disabilities into their communities (Finland). The National Programme on Deinstitutionalization of Persons with Intellectual and Psycho-social Disabilities from Residential Institutions for the period 2018 – 2026\(^2\) was adopted in 2018. Despite the implementation of deinstitutionalization reform, the process is slow due to the underdevelopment of alternative community services. The persons placed in institutions have limited opportunities to develop their independent living skills, and face a lack of educational and employment opportunities, and limited access to good quality medical services.

6. **Recommendation nr. 121.161** Continue adopting measures that contribute to the protection and social inclusion of persons with disabilities, particularly as regards the provision of social services (Argentina). **In the process of implementation.** Despite the progress in extending the range of social services, still there is limited access to disability-specific support and community-based social services and programmes, especially regarding early intervention services and support services for persons with severe disabilities.

7. **Recommendation nr. 122.30** End discrimination against people with intellectual and psychological disabilities and implement tools to encourage their employment (Croatia). **Low implementation status.** In the country there is still a high level of reticence towards persons with intellectual disabilities (2.6 out of 6), according to the study on equality perceptions and attitudes from 2018\(^4\), being perceived as “aggressive people, dangerous to society, illiterate people”. There is a lack of social services at community level to ensure their inclusion and empowerment.

8. **Recommendation nr. 121.155** Continue to strengthen policies on ensuring the opportunity to enrol in education for children and young people with disabilities (Libya). **Partial implementation of the recommendation.** Throughout the reporting period the state has implemented the National Programme in Inclusion Education for the period 2011 – 2020. Still, the main preoccupations related to the implementation of this recommendation are the fact that the policies and budgets for inclusive education are not evidence-based, due to the lack of disaggregated based on disability, including type of disability, residence, age, etc. Another preoccupation is related to the underdevelopment of referral mechanism and cross-sectorial collaboration on inclusive education.

9. **Recommendation nr. 121.156** Eliminate barriers preventing access of children with disabilities to the education system (Hungary). **Partial implementation of the recommendation.** Despite the progress in facilitating the process of educational inclusion of children with disabilities, series of issues of concern are still impeding their equal and free access to quality inclusive education:
   - Lack of adapted transportation and lack of/infrastructural accessibility of educational institutions.
   - Limited access to support services for students with disabilities at all levels of education, such as support teachers, personal assistants, assistive technologies and means of

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\(^2\) The Programme can be accessed at the following link: [https://www.legis.md/cautare/getResults?doc_id=109067&lang=ro](https://www.legis.md/cautare/getResults?doc_id=109067&lang=ro)

\(^3\) The Programme can be accessed at the following link: [https://www.legis.md/cautare/getResults?doc_id=109067&lang=ro](https://www.legis.md/cautare/getResults?doc_id=109067&lang=ro)

communication, including for children with visual impairments.

- Despite the wide range of trainings in inclusive education, there is still weak capacity of teachers and personnel at all levels of education to work with students with different types of disabilities, especially children with sensory disabilities, intellectual and psychosocial disabilities.
- There is still low level of tolerance, acceptance and discrimination on the ground of disability.

10. **Recommendation rn. 121.157** Adopt positive measures to enable people with disabilities and national minorities to have access to education, health services and an adequate standard of living (Panama). In the process of implementation. Persistence of the medical approach of disability is also of concern. No progress in raising awareness of the professionals in the health sector on the human rights based approach to disability, including related to development and provision of health services.

IV. **Main issues of concern with regards to protection of the rights of persons with visual impairments in the Republic of Moldova since the second periodic review.**

11. **Lack of disaggregated data and capacity of the system to respond to the needs of persons with visual impairments.** There is a lack of disaggregated data related to persons with visual impairment, including children in the country. Persons with visual impairments, represent about 4.7 % of all persons with disabilities form the official data5, but in fact, the number exceeds6. According to the data of the Ministry of Education, Culture and Research in 2017, the number of children with low vision was 552 children7, while according to the database of “LOW VISION” centre database there are more than 1000 children and teens having visual impairments. Due to the lack of disaggregated data, the policies and programs neglect the needs of persons with vision impairment.

12. **Persons with visual impairment have limited access to mainstream services due to a lack of assistive technologies and devices, and limited accessibility of information for them.** Mainstream services at community level (educational, health and legal institutions) have no capacities to address the needs of persons with sensory disabilities.

13. **Lack of a mechanism for the insurance with specialized rehabilitation equipment – assistive devices and technologies for persons with visual impairments.** Currently there is no regulations on how to ensure the correction through the low vision aids and technologies for people with visual disabilities, the nomenclature of technical aids does not include the set of rehabilitation services for persons with visual impairment and also the State Social Insurance Budget Law does not include funds for insurance with compensatory technical means for persons with visual impairment. While the country has already the positive practice and experience in developing the mechanism for insurance with rehabilitation equipment and assistive aids for persons with physical and hearing disabilities. Therefore, people with low vision are discriminated in comparison with people having other types of disability, especially locomotory disabilities.

14. **Ensurance with assistive devices and technologies is not covered by the national insurance system.** Legal blindness8 that is the severity of visual disability determines the eligibility of individuals for inclusion in vocational education programs, rehabilitation,

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8 Visual acuity is less than 0.1 (20/200) in the eye with the best view and the best correction. Foreign term of Moldovan legislation
disability benefits, tuition, technical devices compensation, tax deductions etc.

15. **Lack of/limited accessibility of assistive technologies impede the process of social inclusion of persons with vision impairments.** The lack of informational accessibility of public institutions, roads and public transportation, as well as of public information, including in emergency situations, as well as limited access to assistive technologies, are among the root causes of the limited participation of person with disabilities in civil, political and cultural life. This also impede the process of educational inclusion and employment, and limited access to mainstream and support services.

16. **Mainstream educational system does not fully respond to the educational needs of children with visual impairments.** Despite the progress in inclusion of children with disabilities, the educational inclusion of children with visual impairments is limited due to limited access to assistive technologies that would facilitate the education process of this group of children, but also the limited knowledge and skills of teachers on inclusive education of children with sensory disabilities.

V. **Recommendations for decision makers**

17. Develop and approve the mechanism in order to implement the provisions of Ch. VI, Art.43 (2) of Law No. 60 on Social Inclusion of Persons with Disabilities by providing specialized rehabilitation equipment for visual impaired persons.

18. Develop and adopt the mechanism of personal insurance with specialized rehabilitation equipment – means for persons with visual impairments.

19. Develop and adopt the national regulations providing with assistive devices and technologies for persons with visual impairments.

20. Develop the set of rehabilitation services for persons with visual impairments and include in the Nomenclature of technical aids and through amendments to the national regulation on insurance and provision of certain categories of citizens with technical aids.

21. Ensure the educational institutions with assistive technologies that would facilitate the educational inclusion of students with vision impairments.

22. Develop and organize initial and on-going capacity building programs for teachers on ensuring quality inclusive education for all children, including children with sensory disabilities.