



European  
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Charter

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## **EUROPEAN SOCIAL CHARTER**

10<sup>th</sup> National Report on the implementation of the  
European Social Charter

submitted by

### **THE GOVERNMENT OF GEORGIA**

- Articles 11, 12 and 13 for the period 01/01/2012 - 31/12/2015
- Complementary information on Articles 7§5, 7§9, 8§5, 17§1, 19§1, 19§3, 19§4, 19§6, 19§11, 27§1 and 27§2 (Conclusions 2015)

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**CYCLE 2017**



**EUROPEAN SOCIAL CHARTER (REVISED)**

**Strasbourg, 3.V.1996**

**Georgia**

**Report 2016**

**On the implementation of the Articles:**

**Article 3 –The right to safe and healthy working conditions;**

**Article 7 –The right of children and young persons to protection;**

**Article 8 –The right of employed women to protection of maternity;**

**Article 11 – The right to protection of health;**

**Article 12 – The right to social security;**

**Article 14 –The right to benefit from social welfare services;**

**Article 17 –The right of children and young persons to social, legal and economic protection;**

**Article 19 –The right of migrant workers and their families to protection and assistance;**

**Article 27 –The right of workers with family responsibilities to equal opportunities and equal treatment;**

## **Response of the Government of Georgia**

### **Article 3 – The right to safe and healthy working conditions**

With a view to ensuring the effective exercise of the right to safe and healthy working conditions, the Parties undertake, in consultation with employers' and workers' organizations:

- 1 to formulate, implement and periodically review a coherent national policy on occupational safety, occupational health and the working environment. The primary aim of this policy shall be to improve occupational safety and health and to prevent accidents and injury to health arising out of, linked with or occurring in the course of work, particularly by minimizing the causes of hazards inherent in the working environment;
- 2 to issue safety and health regulations;
- 3 to provide for the enforcement of such regulations by measures of supervision;

### **Article 3§1**

#### **GoG response**

The Ministry of Labour, Health and Social Affairs of Georgia (MoLHSA) undertook concrete steps to elaborate special mechanisms which will further ensure inspection on working conditions at workplaces. The mechanism will be equipped with corresponding administrative and executive rights and will progressively introduce the International Labour Organization's standards.

The Labour Conditions Inspecting Department was established under MoLHSA according to GoG's Resolution N81 designating March 2, 2015. The Department was recruited by staff members trained in the framework of the "State Program for Monitoring the Labour Conditions" and are preparing/will prepare ground for the introduction of the effective inspection mechanism. Namely, the Department is elaborating and improving corresponding legal base, ensuring the instillation of updated technical regulations/standards with the aim to inspect occupational health and safety conditions in different organizations/enterprises. Primary goals of the Department are: elaboration and improvement of legislative base for efficient monitoring of occupational health and safety conditions in different organizations/enterprises; elaboration of recommendations for preventing discrimination and forced labour at workplaces; studying and analyzing facts and causes of discrimination in case of employees' or employers' demand; support implantation of safety protection mechanisms in organizations/enterprises; increase of employers' and employees' awareness on threats of human trafficking and plan activities on the subject; take relevant measures for the prevention of trafficking in human beings.

For the beginning formation, the labour inspection mechanism aims to solve two issues: 1) to review legislative base and define the gaps; to amend existing legislation and draft a new one. 2) to select and train skilled candidates – Labour Inspectors.

The Georgian Government adopted Resolution N 38 designating February 5, 2015 – "State Program for Monitoring Labour Conditions". The program prevents facts of human trafficking in labour relations;

increase employees' and employers' awareness on legislation reforms; prevent violation of safety norms. In the framework of the program vast attention is be paid to public awareness building as currently there is lack of activities and systemic approaches in this direction. On the basis of the same program, in order to ensure healthy labour conditions defined by the legislation, it was decided to examine/monitor enterprises on the basis of a prior notification for consulting employers and employees, increasing awareness, revealing systemic violations, including specific activities directed towards their elimination in the relevant policy document and, on the basis of the analysis, the development/revision of the relevant standards on the occupational safety and health protection, as well as the preparation of legislative proposals. In the framework of **the State Program on Monitoring of Labour Conditions, in July 2015, 25 primary and 25 backup persons (monitors/inspectors)** were selected, who would carry out the monitoring. Their job is to increase employees' and employers' awareness regarding detected violations, inform and consult them on the existing labour law and labour norms on work health and safety. They shall inspect companies in regard to the work safety and health protection; promote execution of the labour law, prevent discrimination in employment relationships, assess the risk related to the violation of labour rights, labour safety and health protection in the organizations, and, on the basis of the evaluation, develop a monitoring plan of these organizations.

The new **"State Program for Inspecting Labour Conditions 2016"** was approved by the Government of Georgia. **Objectives** of the Program, among others, are insurance of protection of labour safety standards; awareness rising of employers' and employees' in terms of detected facts of violations, consultancy, informational campaign, prevention of trafficking, and identification of needs of institutional reforms etc. Monitoring reports were drafted and recommendations were elaborated. Employers have already received reports and recommendations. Analysis of reports, questionnaire and recommendations are in the process. According to current data, inspectors visited around 300 **companies**. With their help inspection reports are being drafted and recommendations are elaborated. Employers have already received **recommendations on occupational safety and health issues**.

The Ministry of Labour, Health and Social Affairs **purchased additional instruments** for labor inspectors in order for them to be fully equipped and the process of inspection - effective.

International Labour Organization actively participates in the labour legislation amendment process. Especially, the involvement of ILO plays a vital role in the elaboration of mechanisms at all stages for the improvement of labour inspection reform. Besides, European experts support the Georgian Government in the implementation of the Association Agreement in order to review national legislation and make it in compliance with the legal acts/instruments covered by Annex XXX.

➤ **Ongoing and future activities of the Labour Inspectorate:**

- Elaboration of Strategy of Labour Inspection;
- Elaboration of Ethic code of Labour Inspector;
- Conducting trainings and other activities aiming at raising the qualification of the staff;
- Deepening the international cooperation;
- The authority of labour conditions inspecting department will be increased by inspecting the child labor cases in the companies

- **Establishment of a web-page aiming at disseminating** all the information concerning the institute, the process, etc.

## **Article 3§2**

### **GoG response**

The amendments have been made to the Laws - on 'Combating Human Trafficking' and on 'Control of entrepreneurial activity'. The amendments in both of the above mentioned Laws envisage **proactive supervision of this Inspection Department** with other appropriate state agencies in the field of human trafficking (forced labor and labor exploitation) prevention. In particular the department is authorized to inspect the labor conditions with the aim to identify and respond the violations. It means that the labor inspectors have the ability and power to ensure the proactive supervision mandatorily and not voluntarily. That will contribute to effective planning and implementation of measures for prevention of forced labor and labor exploitation, as well as the promoting the identification and increasing the efficiency of combating the human trafficking.

In order to prove the mentioned functions the Resolution of Government of Georgia "**On Approval of Rule of State Supervision/Labour Inspection of Prevention of and Responding on Forced Labour and Labour Exploitation**" was elaborated, which was approved in March 2016. Following the supervision rule a questionnaire and the annual plan were approved by the Individual Administrative-Legislative Act of the Minister of Labor, Health and Social Affairs, which includes information on the rule of selection, number, sequence and terms of inspections of the establishments. Currently, **95 companies have been inspected 7 out of which were not scheduled**. It is worth mentioning that one case was addressed to the competent authorities. Fortunately, no cases of forced labor and labor exploitation have been revealed.

**Draft law on "Occupational Health and Safety"** is prepared and is in the process of discussion with stakeholders. The law is to be discussed and the decision made at the next meeting of the Tripartite Social Partnership Commission.

As to the legislative work with the support of EU Technical Assistance Project the following **7 EU Directives** have been drafted in order to transpose them to the Georgian legislation and fulfill the commitments taken by EU-Georgia Association Agreement (Annex XXX):

- ✓ Council Directive of 30 November 1989 concerning the minimum safety and health requirements for the workplace - 89/654/EEC;
- ✓ Council Directive – of 16 September 2009 concerning the minimum safety and health requirements for the use of work equipment by workers at work - 2009/104/EC;
- ✓ Council Directive - of 30 November 1989 on the minimum health and safety requirements for the use by workers of personal protective equipment at the workplace- 89/656/EEC.
- ✓ Directive 90/269/EEC - manual handling of loads of 29 May 1990 on the minimum health and safety requirements for the manual handling of loads where there is a risk particularly of back injury to workers.

- ✓ Directive 92/58/EEC - safety and/or health signs of 24 June 1992 on the minimum requirements for the provision of safety and/or health signs at work (ninth individual Directive within the meaning of Article 16 (1) of Directive 89/391/EEC)
- ✓ Directive 99/92/EC - risks from explosive atmospheres of 16 December 1999 on the minimum requirements for improving the safety and health protection of workers potentially at risk from explosive atmospheres (15th individual Directive within the meaning of Article 16(1) of Directive 89/391/EEC).

### **Article 3§3**

#### **GoG response**

Since 2015 year the Labor Conditions Inspecting Department has inspected companies differentiated by following fields: oil refining, medical, construction, tourism, distribution, catering sector, and mining, heavy and light industry.

In the framework of the program of Labor Conditions Inspecting Department, the inspection covered Tbilisi and regions as well. (Imereti, Samegrelo, Adjara, Kakheti, Shida and Kvemo Kartli, total 60 objects).

During the inspections, statistically the following contraventions have occurred:

#### **Tbilisi (since 2015 y. up to now)**

- Fire safety system -50
- Electricity – 32
- Personal protective equipment – 28
- Collective means of protection systems malfunctions – 25
- Microclimate – 29
- Labor safety responsible person – 30
- Scavenge and utilizations – 11
- Disinfecting substances – 5
- Increased noise – 17
- Increased dust – 14
- Insufficient lightening – 17
- Ergonomics and others – 31

#### **Regions (since 2016 y up to now)**

- Fire safety system – 40
- Electricity – 36
- Personal protective equipment – 28
- Collective means of protection systems malfunctions – 10
- Microclimate – 20
- Labor safety responsible person – 18
- Scavenge and utilizations – 4
- Disinfecting substances – 0

- Increased noise – 42
- Increased dust – 36
- Insufficient lightning – 2
- Ergonomics and others – 31

During the inspections, mostly occurred the following contraventions:

- Fire safety system
- Electricity
- Ventilation system
- Labor safety responsible person
- Personal protective equipment
- Collective means of protection systems malfunctions
- High risk of professional diseases
- Microclimate

#### **Article 7 – The right of children and young persons to protection**

With a view to ensuring the effective exercise of the right of children and young persons to protection, the Parties undertake:

5 to recognize the right of young workers and apprentices to a fair wage or other appropriate allowances;

#### **Article 7§5**

##### **GoG response**

Remuneration for apprenticeship is equal to monthly salary of the employed on the same position. In private sector minimum wage according to the President Order №351 is 20 GEL and in the public sector pursuant to the President Order №43 is 135 GEL, although in practice the minimum wages are much higher.

According to the Labour Code of Georgia, the amount of wages is subject of agreements between employees and employers. In the cases of violation of their rights everyone have the right to apply to the court. The Labour Code of Georgia regulates the forms of payment of salaries. According to the article 31 of Labour code a labour agreement shall determine the form and amount of remuneration. The norms of this article shall apply unless otherwise provided for by a labour agreement. Remuneration shall be paid out once a month and an employer shall be obliged to pay an employee 0.07 per cent of the delayed sum for each day of any delayed compensation or payment.

**Average monthly nominal salary of employees, 2001-2015<sup>1</sup>:**



<b>2001</b>	94.6	GEL
<b>2002</b>	113.5	GEL
<b>2003</b>	125.9	GEL
<b>2004</b>	156.6	GEL
<b>2005</b>	204.2	GEL
<b>2006</b>	277.9	GEL
<b>2007</b>	368.1	GEL
<b>2008</b>	534.9	GEL
<b>2009</b>	556.8	GEL
<b>2010</b>	597.6	GEL
<b>2011</b>	636.0	GEL
<b>2012</b>	712.5	GEL
<b>2013</b>	773.1	GEL
<b>2014</b>	818.0	GEL
<b>2015</b>	900.4	GEL

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<sup>1</sup> [http://www.geostat.ge/index.php?action=page&p\\_id=149&lang=eng](http://www.geostat.ge/index.php?action=page&p_id=149&lang=eng)

**Average monthly nominal salary of employees by economic activity, 2005—2015<sup>2</sup>:**

GEL

	2005	2006*	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Total</b>	<b>204.2</b>	<b>277.9</b>	<b>368.1</b>	<b>534.9</b>	<b>556.8</b>	<b>597.6</b>	<b>636.0</b>	<b>712.5</b>	<b>773.1</b>	<b>818.0</b>	<b>900.4</b>
Agriculture, hunting and forestry	128.9	148.1	184.9	299.3	264.0	279.2	392.6	424.6	495.0	504.3	578.2
Fishing	93.0	94.4	168.8	211.1	257.2	341.4	271.1	388.9	587.1	503.3	849.5
Mining and quarrying	210.8	352.3	657.7	808.9	677.7	812.3	838.6	874.5	893.1	902.8	1,047.4
Manufacturing	212.1	260.5	357.7	510.5	447.9	510.6	552.2	623.0	683.0	714.0	767.1
Production and distribution of electricity, gas and water	341.5	398.2	533.8	738.3	766.8	822.9	877.0	919.9	967.6	1,039.1	1,117.2
Construction	296.4	391.0	494.5	597.3	626.1	671.0	738.5	890.8	868.2	942.8	1,182.0
Wholesale and retail trade; repair of motor vehicles and personal and household goods	173.6	246.4	355.5	510.6	517.7	583.6	548.9	650.0	692.5	702.1	783.9
Hotels and restaurants	108.2	196.5	238.4	333.6	364.7	377.5	342.4	397.5	437.1	477.5	563.0
Transport and communication	265.7	391.3	492.3	667.7	729.3	787.6	873.8	943.4	1058.6	1,074.7	1,189.4
Financial intermediation	1049.2	779.0	1014.5	1343.5	1319.0	1276.7	1386.3	1402.3	1505.8	1,590.3	1,691.4
Real estate, renting and business activities	210.8	284.2	405.8	540.1	640.3	596.5	674.3	843.5	848.2	911.2	975.0
Public administration	342.4	448.0	585.4	869.5	888.8	973.0	998.8	1031.2	1152.1	1,232.2	1,342.7
Education	92.5	122.1	153.0	243.7	269.3	305.1	319.6	355.1	422.9	456.7	483.3
Health and social work	99.5	143.3	206.4	305.8	366.7	446.8	522.9	599.5	667.9	741.8	844.6
Other community, social and personal service activities	113.4	175.6	260.6	408.7	411.1	460.1	511.5	602.1	680.8	687.2	785.1

<sup>2</sup> [http://www.geostat.ge/index.php?action=page&p\\_id=149&lang=eng](http://www.geostat.ge/index.php?action=page&p_id=149&lang=eng)

As to the further steps the Government of Georgia is taking, first of all, those steps encompass elaboration/development of legislative framework in order to ensure that minimum wage paid is fair for everyone, including for young workers.

“State Strategy of Labour Market Formation and its Implementation Action Plan for 2015-2018” is a main strategic document the Government is working within in terms of labour and employment sphere. Strategy’s action plan envisages enhancing social partnership by supporting Tripartite Social Partnership Commission. In order for the TSPC to become credible and functional Government of Georgia with the support of International Labour Organization met the social partners i.e. Employers and Employees’ organizations in the format of social dialogue on January 23, 2016. The parties agreed on those important issues that will be discussed throughout the year at the meetings of Tripartite Social Partnership Commission. The first and the most important decision made at the meeting was amendment to the Georgian Government’s Resolution N 258 of 7 October 2013. The amendments encompass allowing the members of the Government (members of the TSPC) other than Prime-Minister call the commission and accordingly make it more functional and credible. Following amendments to the Georgian Government’s Resolution N258 of 7 October 2013, on April 11 this year the TSPC meeting was held at the Ministry of Labor, Health and Social Affairs. TSPC meeting approved a strategic plan for 2016-2017. In order to work on the issues covered by the plan the Ministry of Labour, Health and Social Affairs of Georgia was tasked by the TSPC to set up a working group. The aim of the working group is to discuss the strategic plan issues and address the TSPC for the final decision.

The strategic plan among other different activities includes minimum wage reform in the country. The minimum wage reform along with the existing minimum wage analysis will be presented by Trade Union Confederation for the discussion with social partners and then submitted to the TSPC.

#### **Article 8 –The right of employed women to protection of maternity**

With a view to ensuring the effective exercise of the right of employed women to the protection of maternity, the Parties undertake:

- 5 to prohibit the employment of pregnant women, women who have recently given birth or who are nursing their infants in underground mining and all other work which is unsuitable by reason of its dangerous, unhealthy or arduous nature and to take appropriate measures to protect the employment rights of these women

#### **Article 8§5**

##### **GoG response**

According to the Labour Code, it is prohibited to conclude the labor agreement on heavy, hard or hazardous activities with a pregnant or breast-feeding woman. Accordingly, Georgian labour legislation prohibits the employment of pregnant women, women who have recently given birth or who are nursing their infants in heavy, hard or hazardous work.

According to the article 14 of the Georgian Law on Public service the labour legislation of Georgia shall apply to officials and support staff subject to the peculiarities set out in this Law. Relations that are related to public service and are not regulated under this Law shall be governed by appropriate legislation. Therefore the abovementioned restriction applies to women employed in the public sector.

According to the Article 6 (4) of the Law of Georgia on Gender Equality, the legislation of Georgia shall ensure creation of favorable working conditions for pregnant women and nursing mothers which excludes their work in hard, harmful and dangerous environment, as well as at night.

The detailed provisions regarding the protection against all known hazards the health and safety of women is considered in the draft law on Health and Safety at work.

The draft law on Health and Safety at work defines sensitive risk groups and determines that those groups are: pregnant and breastfeeding women, employees under the age of 18 and people with disabilities. They should be protected from specific hazards that may exist for them. It is also defines that the employer shall not employ the people under the age of 18, also pregnant and breastfeeding women for performing heavy, harmful and hazardous work. The list of heavy, harmful and hazardous works is determined in the Decree of the Minister of Labor Health and Social Affairs of Georgia. The draft law is in the process of discussions and the Tripartite Social Partnership Commission will make the final decision before submitting to the Parliament of Georgia for adoption.

As already mentioned (article 7&5) the working group was set up under the Tripartite Social Partnership Commission. One of the aims of the groups is to work on amendments to the **Georgian Labour Code**. Proposals and suggestions regarding possible **amendments (on gender equality, equal opportunities, discrimination on workplaces, development of human resources, etc.)** are being recorded and will be discussed at the working group meetings.

The possible amendments in terms of protection of employed women will include guarantees for pregnant employed women in order to prevent them from harm and hazardous work.

Apart from that Georgia as a member of International Labor Organization took a commitment to approximate national legislation and the situation to the International Labor Standards. Apart from that Georgia as a member of Council of Europe and a country ratifying European Social Charter is obliged to implement the Charter at the national level. One of the most important and challenging issues that need to be addressed encompass the list of hard, harm and hazardous jobs for minors and definition/determination of light work (Labor Code of Georgia). Accordingly, the Ministry of Labour, Health and Social Affairs of Georgia addressed International Labour Organization for a technical assistance to elaborate and to amend existing lists of hard, harm and hazardous jobs and the list particularly focusing on minors.

## **Article 11 – The right to protection of health**

**With a view to ensuring the effective exercise of the right to protection of health, the Contracting Parties undertake, either directly or in cooperation with public or private organizations, to take appropriate measures designed inter alia:**

- 1 to remove as far as possible the causes of ill-health;
- 2 to provide advisory and educational facilities for the promotion of health and the encouragement of individual responsibility in matters of health;
- 3 to prevent as far as possible epidemic, endemic and other diseases, as well as accidents.

### **11&1**

#### **GoG response**

**Right of access to health care:** Georgia general public health policy and legal framework include:

- Law on Health care of Georgia, adopted in 2010, defines the principles of state policy in the field of health care and Citizens' rights in Health Care
- Law on Public Health of Georgia, adopted in 2007, provides a policy basis for supporting population health and healthy lifestyle, ensuring of safe environment, supporting of family reproductive health, prevention of communicable and non-communicable diseases.
- Georgian Healthcare System State Concept 2014-2020 “Universal Healthcare and Quality Management for Protection of Patient Rights” (Decree of GoG N724, 26.12.2014) defines State policy in the healthcare sector, such as protection of human rights and justice; elimination of inequality in terms of universal access to medical services and the right to participate in decision-making process.
- Social-economic development strategy of Georgia “Georgia 2020” (Decree of GoG N400, 17.06.2014) aims to provide affordable and quality health care
- Law on the rights of patients, adopted in 2000, designed to protect citizens' rights in health care, as well as their dignity and privacy

In Georgia the right of health protection, defined by article 25 of UN Declaration of Human Rights is regulated by the law on health Care of Georgia: article 6 discrimination of the patient on the basis of race, language, sex, religion, political or other opinion, national, ethnic or social origin, property and title, place of residence, disease, sexual orientation or negative personal attitude is not allowed.

By the Healthcare System State Concept, the aim of the state policy in the healthcare sector is to increase life expectancy of Georgian population, reduce maternal and child mortality, improve health status and quality of life; this aim could be attained through provision of universal access to quality medical services and modern pharmaceutical products, balanced distribution of financial burden and increasing financial protection in the healthcare sector, effective use of existing resources, adequate response to population's health needs and development of flexible governance system.

Taking into account principles declared at international level, epidemiological image and social/economic reality of the country, the Ministry develops following 10 priority directions for the development of the healthcare sector:

1. Health in all policies – general state multi-sectoral approach
2. Development of the healthcare sector governance
3. Improvement of healthcare financing system
4. Development of quality medical services
5. Development of human resources in the healthcare sector
6. Development of health management information systems.
7. Support of maternal and child health
8. Improvement of prevention and management of priority communicable diseases
9. Improvement of prevention and control of priority non-communicable diseases
10. Development of public health system

**Universal Health Coverage:** Universal Health Coverage (UHC) means everyone can access quality health services without struggling to pay for them. Reaching UHC is imperative to the achievement of SDG 3 for 2030 – Ensure healthy lives and promote well-being for all at all ages – and its importance is recognized across the global public health community.

Improving access to affordability and quality of healthcare services is the main priority for the Government of Georgia (GoG) that is reflected into an unprecedented, almost 3-fold expansion of budgetary allocation for health.

In February 2013, the GoG has launched The universal Health Care Program and has led to a major expansion in population entitlement to publicly financed health services.

The beneficiaries of the UHC program are persons holding citizenship document, neutral ID card, neutral travel document; persons with a status in Georgia without citizenship, refugees or humanitarian status holders. Population of Autonomous Republic of Abkhazia's, who possess the above mentioned documents, as well enjoy the State health care programs, as the rest of the population.

As a result, coverage has expanded substantially and rapidly from 29.5% of the population in 2010 and around 40% at the end of 2012 to 100% after 2013. Most of those benefiting from the UHC programme are being covered for the first time. Georgia now has a foundation of universal entitlements within its health system, representing a major step towards improving access to health services for the entire population.

Universal Healthcare Program covers the basic package of planned and emergency in- and out-patient clinical care, including oncology and maternity services.

Very impressive results of the survey, Health utilization and expenditure survey which was conducted by WHO, World Bank and USAID in September-October 2014. The UHC reforms have improved access to health care and people are more likely to consult a health care provider when they are sick. Financial barriers to access have declined, mainly for outpatient visits and hospital care. After implementation of UHC program, increase utilization of health services. If until 2013, visits to the outpatient-hospital did not exceed 2 visits per person annually, in 2013 in raised till 2.7 and in 2014 till 3.4 and exceeded the level recommended by

the World Bank for developing countries. The hospitalization rate per 100 inhabitants increased to 7.8 (2010) to 11.4 (2014).

Financial barriers to access have declined since 2010, mainly for outpatient visits and hospital care. In 2010, almost 17% of those with acute sickness did not seek care because they did not have enough money. In 2014, this share had fallen to 10%. The share of patients reporting that they expected to pay for a consultation with a doctor at the nearest facility halved between 2010 and 2014, falling from 73.7% in 2010 to 35.6% in 2014. This fall was large in urban areas.

Overall, financial protection has improved since 2010. On average, total OOPs fell from 1,257 GEL per household per year in 2010 to 943 GEL in 2014, driven primarily by lower hospitalization costs. A decline that was statistically significant in urban and rural areas, for the third and fourth quintiles and in general and maternity hospitals.

State referral program covers cost of medical services and medicines to the individual needs of patients, which are not covered by other state health programs. Program beneficiaries are those people who live in the Autonomous Republic of Abkhazia, Tskhinvali Region, in the villages: Perevi, Eredvi, Kurta Azhara and Stateless persons permanently residing in Georgia, despite having the an official document of Georgian citizenship. (Decree of GoG, N331, November 3, 2010).

**State healthcare programs:** Except Universal Health Care program duties of the government in 2013, which it took on its own responsibility, includes multiple programs of public healthcare and provision of medical services in most important healthcare sectors.

**Public healthcare programs:** The aim of public healthcare program is supporting healthcare in the population, settling rules of healthy lifestyle, which is executed by different programs, helping to prevent many dangerous diseases, also arrangements to improve health state of the population.

Public healthcare includes programs, which help to prevent infectious and oncology diseases. Early detection of these diseases insures protection of the population to be increased from one point, and from the other point it ensures optimization of state expenses. Also immunization of the population, early detection of the diseases and support of screening programs, infectious diseases, like tuberculosis, malaria, hepatitis viruses, AIDS, and other infections, controlling their spread and making necessary arrangements to settle healthy lifestyle for the entire population of the country.

- Early detection of the diseases and screening supports settling rules of healthy lifestyle and also early detection and prevention of spread of multiple diseases: cancer screening; screening of delays in children development in ages 0-6; Early detection and prevention of Epilepsy.
- Immunization protects the population from controlled infections
- Epid-supervisory program improves epidemiological safety and epid-supervisory and laboratory services for infectious diseases
- Safe blood program – All donation have been All donation have been screened on HIV/AIDS, HCV, HBV and syphilis
- Professional diseases prevention program protects employees from professional diseases
- Infectious diseases management program ensure adequate in-patient hospitalization service in case of infectious diseases

- Tuberculosis Management program controls cases of tuberculosis in the country, persons with tuberculosis (including questionable cases) are insured with diagnostic and treatment possibilities.
- AIDS program controls AIDS infections in the country, persons with AIDS infection and also the persons of high risk group are insured with diagnostic and treatment possibilities.
- Mother's and Children's health program includes visits in the frame of antenatal observation; investigation of newborns on hypothyroid, phenylketonuria, hyperphenylalaninemia and mucoviscidoses; screening of pregnant women on genetic pathology; ensure adequate in-patient care for high risk pregnant, women in childbirth and after childbirth.
- Drug use prevention program - drug users are provided with drug replacing therapy and medical supervisory care; visits in-patient detoxication and rehabilitation purposes

**Delivering medical services to the population in priority fields:** The aim of the project is to ensure geographic accessibility of integrated medical services, also to increase effectiveness according to expenses and results of medical services; reduction of mortality for mothers and children, to protect the population from expensive medical expenses, reduction of mortality caused by infectious and non-infectious diseases, improvement in provision of specific medications for the population.

- Diabetes management program
- Onco-hematological service for Children
- Dialysis and kidney transplantation
- Palliative care for incurable patients
- Treatment of the patients with rare diseases and dependent on permanent replacement therapy
- Emergency service and medical transportation
- Program of village Doctors
- Referral service
- Medical examination of the population called up for military services

**Treatment/Prevention of Hepatitis C:** In 2015, Hepatitis C elimination program has launched, with greatest efforts of the Government of Georgia, the US Center for Disease Control and the World Health Organization and with support of the pharmaceutical company "Gilead". The decision was made based on high prevalence of hepatitis C (15% of the population) and the high cost of treatment (12-week course of medications exceeds 84 000 US dollars). Sopesbuvir, worth of 1 billion US dollars, is provided free by the company Gilead through the agreement between the Government of Georgia and Gilead.

Since April 2015, patients with hepatitis C are provided with pre-treatment diagnostics, coverage of diagnostics for monitoring in the process of treatment, and treatment of hepatitis C with the latest generation of expensive medicines (Sopesbuvir, Farvoni, Interferon and Ribavirin). Interferon and Ribavirin are purchased through the state budget. The second phase of Hepatitis C elimination begin in June, 2016. The Government expand the program and include 20 000 patients.

**Breast cancer drugs:** To increase access to medicines for chronic patients in order is another important milestone in an unprecedented joint program of the Ministry and the City Hall, which includes providing an expensive drugs trastuzumab (herceptin) of treatment for HER2 + Receptor positive Women with breast cancer.



**Maternal and child health:** According to official data, the under-5 mortality rate has been steadily declining during the last several years. In 2015, under-5 mortality was 10.2 per 1,000 livebirths. Almost 60% of all deaths in children aged under-5 occurred during the neonatal period. Accordingly, management of newborns at neonatal period seems to be the most significant issue.

In 2014 Government adopted Georgian Healthcare System State Concept 2014-2020 “Universal Healthcare and Quality Management for Protection of Patient Rights”. One of the main priorities in the State Concept is support for maternal and child health.

To improve accountability and registration of maternal and child mortality cases, since February 2013, the MoLHSA started maternal and child mortality emergency notification system. The system ensures urgent provision of information of all maternal deaths, deaths of 0-5 years children and stillbirth cases. Health care facility is obliged to notify MoLHSA by phone call within an hour in case of maternal or 0-5 child death and stillbirths, followed by confirmation of the call by submission of written notification form within 24 hours

For efficiency and improvement of the quality of perinatal services, in 2015 MoLHSA started piloting perinatal regionalization process in two regions (Imereti and Racha-Lechkhumi). This health systems organization and quality improvement reform was launched with support of USAID and expanded to Tbilisi and Kvemo Kartli regions in 2016. Perinatal regionalization envisages to provide each patient quality of maternal and neonatal health services at right and right time. Expansion of the project is very important for the country for achievement SDG Goals of reducing maternal and infant mortality.

To implement the reform, In January 15 2015 Ministry, under the ordinance N01-2 / N of Labour, Health and Social Affairs the regionalization of perinatal services levels and patient referral criteria were approved. In addition, on 20 January 2015 under ordinance N01-12 / O of The Ministry of Labour, Health and Social Affairs approved evaluation of perinatal regionalization service levels and perinatal regionalization committee with the terms and responsibilities was established.

Following activities were conducted:

- 20 perinatal service providers in Imerety and Racha-Lechkumi regions were assessed and specific recommendations provided for the desired level of compliance;
- In Imereti region, the 2nd level perinatal clinics significantly improved equipment availability in compliance with standards for level 2 facilities ;
- Following the evaluation and standard compliance, 1 facility was assigned the highest level III, 13 facilities level II and 5 facilities level I. Four facilities did not qualify for any level and were provided recommendation to stop the services until standard compliance is reached.
- Regionalization process monitoring mechanism was developed;
- The participants of the 1st and 2nd level of clinics 60 obstetrician, 65 neonatologist, 55 antenatal care providers obstetrician-gynecologist, 37 nurses (midwives, obstetric and neonatal nurses) were trained. Level 2 ad 3 perinatal service provider clinic obstetricians and neonatologists clinical skills improved through simulation-based training at the national simulation training center and Level 3 neonatal facilities;
- To improve referral communication and provide adequate referral, employees of emergency coordination department of the central office were also trained;

- For the purpose of proper operation and monitoring process on October 7th 2015 under decree №01-289 and the Ministry of Labour, Health and Social / O has developed "perinatal regionalization monitoring form" According to which perinatal service providers are obliged to ensure level appropriate services and submit to the MoLHSA's Perinatal Regionalization Committee monthly form. Information is analyzed and feedback is provided to facilities.

The completion of perinatal regionalization nationwide is planned in 2018.

Through support of UNICEF, it is planned to pilot in Imerety Region home visit model for early detection of developmental delays before age of 3 and to ensure timely referral of identified cases to relevant medical institutions.

**TB Prevention:** Tuberculosis (TB) remains an important public health problem, although it has been reducing year by year the disease burden remains high in the country. In 2014 (preliminary data), a total of 3,840 TB cases were registered or 86 cases per 100,000 population (compared to 96/100,000 in 2013). The National TB Program (NTP) achieved significant progress in TB control by fully implementing the internationally recommended Directly Observed Treatment, Short course (DOTS) strategy since 1995. Substantial improvements were attained in regard to treatment results (treatment success rate in new cases was 84% in 2013), establishing routine drug resistance surveillance since 2005 and providing universal access to treatment of drug-resistant TB (DR-TB) since 2009.

The Government of Georgia in collaboration with the international partners provides significant investments for the National TB program (NTP). The Georgian NTP ensures universal access to diagnosis and treatment of all forms of TB, including DR-TB, in-line with the up-to-date international strategies and guidance.

However, serious challenges remain and much needs to be done to sustain these achievements, in the face of high burden of drug resistance, which represents the key challenge to effective TB control.

Georgia is among the region leaders in the use of new TB diagnostic technologies and drugs. The novel molecular diagnostics (Xpert MTB/RIF) is being rolled out country-wide. The country will expand the use on new anti-TB drugs under the contemporary, evidence-based treatment regimens in 2015, such as Bedaquiline, which is the first new medication developed for DR-TB over the last 40 years. To facilitate country-wide roll-out of the new treatment regimens, capacity building of the health care staff is carried out.

In order to strengthen the social support system for TB patients and their families, the Government is working on the relevant legislative initiative. The document is currently being reviewed by the Parliament of Georgia and will be enforced this year. Furthermore, Georgia launched the cash incentive scheme for TB patients, which aims at improving treatment adherence. Starting 1 June 2014, all DR-TB patients treated in outpatient settings receive monetary incentives equivalent to about 50 USD per month.

It is worth emphasizing that the Government supports improvement of the TB service infrastructure throughout the country. The renovated and well- equipped building for DR-TB in-patient care is functioning since July 2014. This has significantly improved treatment conditions for the patients and ensured high quality standards for infection control. Besides, the construction project for the pediatric TB department was launched in 2015; it is expected that the refurbishment will be finalized by the end of the year.

The Ministry of Labor, Health and Social Affairs of Georgia (MoLHSA) guides and coordinates the NTP activities and streamlines the internal and donor resources with the major purpose to improving the quality of services. The most recent development in this regard is the collaboration between Ministry of Health of France and MoLHSA aiming at capacity development in the field of TB control.

**HIV.** During the years 2012-2014 important steps have been taken to improve the management of communicable diseases.

The country has made significant progress on HIV / AIDS treatment and care. Patients are supplied by the HIV / AIDS clinical services and the inclusion of the patients in them is one of the best in the world. As a result, HIV-related mortality significantly reduced and quality of life of the patients has improved. Mother to child HIV transmission prevention is possible due to the universal access to the care that led to minimize rates of mother to child HIV transmission. However, high-risk groups (injecting drug users, etc.) continue to be a major problem and HIV voluntary counseling and testing coverage are still low.

Through efforts of the Ministry of labor, health and social affairs and by the Global Fund's financial and technical assistance:

- Since 2004, Georgia is the first and so far the only country in the eastern European region to provide and maintain universal access to ARV treatment.
- It is under preparation and will be introduced next year the revised guidelines for the treatment of tuberculosis; under the agreement reached in 2015 new TB drugs will become accessible in Georgia.
- Surveillance of tuberculosis cases has improved dramatically, new definitions have been developed new electronic surveillance system has been established, the introduction of which is carried by the US Agency for International Development across the country.
- Inventory of the existing anti-TB institutions was carried out, capacity analysis of specialized outpatient and hospital services has been performed, and a new plan of the infrastructure improvement was prepared.

**Situation of persons with mental illnesses:** By the Decree N174-Is, the Parliament of Georgia approved the State Concept on the Protection of Mental Health, which complies with the provisions of the UN convention. The Concept is based on fundamental principles: universality, social equality, medical accessibility, solidarity, sustainability, and right to participate in decision-making process, respect of human dignity, transparency and accountability.

The Government of Georgia, by the Decree N762 of December 31, 2014, approved the Strategic Document for 2015-2020 on Mental Health Development and the Action Plan, the primary aim of which is to foster the prevention of mental impairments, protect the rights of persons with mental disorder, diminish the percentage of sickness and mortality as a result of mental disorder in Georgia, ensure self-determination of persons with mental disorders and their integration into the society.

A Program on Mental Health operates under the State Healthcare Program, adopted annually by the Decree of the Government of Georgia. The Program aims at increasing geographic and financial accessibility of the population of Georgia to the psychiatric services. The Program provides for an outpatient psychiatric

services, psycho-social rehabilitation, short-term interventions in psychiatric crises, with services of the community-based mobile team for persons with severe mental disorders, acute and long-term psychiatric inpatient services for children and adults, shelters for persons with mental disorders. The program provides the patients with treatment and additional services (safety and security), where there is a court decision concerning person's hospitalization for coercive psychiatric treatment, based on Article 191 of the Criminal Procedure Code of Georgia.

Within the state program “on Mental Health” (approved annually by the Decree of the Government of Georgia adopted within the “State Program on Health Protection”), in 2015, on the basis of LTD “Tbilisi Mental Health Center” and EPC “Evidence-based Practice Center”, a community-based mobile team servicing persons with severe mental disorder has been launched, patients of which are frequently or for long-term placed in medical facility, and those, who after the check out from the medical facility do not visit an outpatient facility, terminate treatment, which lead to worsening of psychopathological symptoms. Such services are provided by multidisciplinary team. Within the program, a multidisciplinary mobile team ensures development and implementation of individual guidance plans, home services, conduct of social skills trainings of a patient, psychological support of family members of a patient and if necessary, organizes placement of a patient in medical facilities. **Primary health care:** To strengthen primary healthcare and the role of physicians in rural areas, in the first decade of 2014 the salary of the rural doctors and nurses has been increased by 30% (the salary of the physician became 650 LARI instead of 500 LARI and for the nurses 455 LARI instead of 300 LARI). Also was done Centralized procurement of necessary medical documentation and “Doctor’s bags” includes medications, antiseptic material, single use items and instruments. In the frame of the project of updating network of primary healthcare 82 ambulatory have been built and equipped in all regions of Georgia during 2014.

From 2016 Ministry of health will start Primary health care reform. Strategic plan for PHC will be designed and it will be implemented step by step. Main direction of the reform is strength early diagnostics and screening system. The government of Georgia will support further development of the PHC infrastructure through support of state and private investments.

In accordance with the EU association agenda attention will be focused on development/improvement of prevention system and public health policy and programs in priority directions, such as control of communicable and non-communicable diseases, drug abuse and mental health, regulations of blood and blood organ donation, control of excess use of tobacco and alcohol and environmental health.

Increase to health care in the mountainous regions, is one of the priority of the ministry of health. The ministry has completed the redemption procedures of Medical centers which were in ownership of insurance companies in Mountain regions. In 2014 was built Medical Center in Gudauri and Kharagauli.

Since 2014, “Postgraduate Medical Education Program” has been approved that envisages financing of postgraduate/residency training of medical specialty applicants in medical specialties that are in shortage and priority for high-mountain and near-border municipalities. The aim of the program is to improve continuity of medical service delivery and geographical accessibility in the mentioned regions.

**Improvement of infrastructure:** In 2014 building of a new, multidisciplinary university clinic has been initiated in Zugdidi by the Ministry of labor, health and social affairs of Georgia, in the village Rukhi, which will have 220 beds and will be equipped with full auxiliary infrastructure. In 2014-2016 building of a new

emergency medical service center has been initiated in Gori, in the village Tkhviavi, also has started building of multi-profile hospitals in Lentekhi, Kharagauli, Dedoplistskaro, Scringing-Center in Zugdidi, Emergency Center in village Duisi of Akhmeta Municipality.

**Health information system:** Within the framework of the united electronic healthcare system were implemented E-health modules such as universal healthcare system management, pharmaceutical product registration, infectious diseases (including tuberculosis), immunization/vaccination, monitoring and management of priority sectors and public health programs (including psychiatry, drug abuse, HIV-infection, etc.), electronic systems for certification and accreditation of medical personnel.

Work has started on a new, innovative electronic healthcare system E-prescription and EMR – Electronic medical record - that will connect medical service providers, pharmaceutical organizations and regulatory agencies.

**“Birth” Registry:** In 2016, Georgia started electronic system for antenatal and obstetric services, maternal and child health surveillance "Electronic Module of health care for pregnant women and newborns" ("Birth" registry).

The electronic module provides continuous monitoring of each pregnant woman starting from the first antenatal visit till the childbirth.

The system also records data about the health conditions of the babies at the moment of birth. Given the fact, that only few countries in the world have implemented such registries, for Georgia this initiative is an important step forward.

In 2016, according to the preliminary data for the 6 months, the registry has recorded: 23,111 deliveries, 11,394 abortions, 38,340 antenatal visits, 23,140 live births, 210 stillbirths, 64 ectopic pregnancies.

**Health status:** Last several decades, a decrease of mortality and increase of life expectancy at birth are mentioned over the World. Such a change in the epidemiology of diseases partially suffer non-share growth and traumatic injury deaths reduction and also improved management of diseases, early detection of diseases and risk factors associated with improved control. Such epidemiological change happened partially due to a growth of the share of non-fatal diseases, reduction of deaths caused by injuries, and, also, by the improved management of diseases, early detection of diseases and improved control of risk factors

According to the data from the National Statistics Office, last years, the total mortality rate remains stable.

Mortality per 1000 population

	2012	2013	2014	2015
<b>Both sexes</b>	11.0	10.8	13.2	13.2

*Source: NSO Georgia*

Life expectancy at birth, 2015

	2012	2013	2014	2015
<b>Both sexes</b>	74.7	75.2	72.9	72.9
<b>Male</b>	70.2	70.8	68.6	68.6

<b>Female</b>	79.0	79.4	77.2	77.2
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*Source: NSO Georgia*

In Georgia, like in the most of the countries over the World, non-communicable diseases has the largest share in the mortality structure.

Mortality by underlying causes of death (rate per 100000 people), Georgia

	2012	2013	2014	2015
TOTAL	1098.9	1082.0	1317.1	1321.5
Certain infectious and parasitic diseases	811.2	11.4	14.9	13.8
Neoplasms	116.1	111.2	150.9	168.0
Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism	2.7	3.5	6.5	8.8
Endocrine, nutritional and metabolic diseases	27.4	25.0	30.3	29.4
Mental and behavioral disorders	1.6	1.4	2.7	2.1
Diseases of the nervous system	12.9	12.9	16.1	15.2
Diseases of the eye and adnexa	0.04	0.1	0.2	0.4
Diseases of the ear and mastoid process	0.04	0.04	0	0.1
Diseases of the circulatory system	445.4	416.6	553.2	562.7
Diseases of the respiratory system	22.8	25.5	36.0	48.5
Diseases of the digestive system	26.5	28.9	36.1	38.4
Diseases of the skin and subcutaneous tissue	0.6	0.3	0.7	1.2
Diseases of the musculoskeletal system and connective tissue	1.4	1.3	1.8	1.5
Diseases of the genitourinary system	8.1	10.4	14.2	12.6
Pregnancy, childbirth and the puerperium	0.3	0.4	0.5	0.5
Certain conditions originating in the perinatal period	9.9	9.6	10.4	9.3
Congenital malformations, deformations and chromosomal abnormalities	2.3	3.1	4.1	4.1
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	371.3	386.1	386.9	360.1
Injury, poisoning and certain other consequences of external causes	38.2	34.3	51.8	44.9

*Source: NCDC*

Ratios of observed and expected YLDs for the leading 10 causes in 2015

Georgia			Global		
10 leading causes for YLDs	Rank	Ratio observed and expected YLDs	10 leading causes for YLDs	Rank	Ratio observed and expected YLDs
Low back and neck pain	1	0.93	Low back and neck pain	1	0.96
Sensory disorders	2	1.06	Sensory disorders	2	1.0
Major depressive disorder	3	1.01	Major depressive disorder	3	0.93
Diabetes	4	1.1	Skin diseases	4	0.94
Skin diseases	5	0.86	Iron deficiency anemia	5	0.94
Migraine	6	0.98	Diabetes	6	0.97
Iron deficiency anemia	7	0.87	Migraine	7	0.93
Oral conditions	8	1.03	Other musculoskeletal conditions	8	1.31
Stroke	9	2.36	Anxiety disorders	9	0.94
Anxiety disorders	10	0.82	Oral conditions	10	0.86

Source: World Health Organization

In Georgia, diseases of circulatory system have the largest share in the morbidity structure.

Prevalence and Incidence by IVD10 (rate per 100000 people), Georgia

	2012		2013		2014		2015	
	Prevalence	Incidence	Prevalence	Incidence	Prevalence	Incidence	Prevalence	Incidence
<b>TOTAL</b>	64095.0	37028.8	68200.4	40011.6	89351.2	51499.4	101154.1	59677.3
<b>Certain infectious and parasitic diseases</b>	2220.9	1848.6	2679.1	2337.0	2028.3	2579.8	3597.0	2947.4
<b>Neoplasms</b>	973.8	265.6	1099.1	414.0	1658.7	675.4	2378.4	1258.1
<b>Diseases of blood and blood-forming organs and certain disorders involving the immune mechanism</b>	567.4	413.0	535.3	379.6	763.3	496.6	996.9	675.6
<b>Endocrine, nutritional and metabolic diseases</b>	4161.2	1342.4	4446.8	1489.2	5973.8	2090.2	6856.5	2387.8
<b>Mental and behavioral disorders</b>	1850.6	178.5	1708.4	167.8	2547.0	260.0	2682.5	344.7
<b>Diseases of the nervous system</b>	3492.2	1518.0	3111.1	1291.9	4155.5	1792.9	4713.2	1978.4

<b>Diseases of the eye and adnexa</b>	3543.7	1733.0	4242.2	2050.6	5783.3	2864.6	6062.7	2881.2
<b>Diseases of the ear and mastoid process</b>	1568.7	1183.1	1679.6	1228.0	2027.2	1466.7	2701.1	1879.9
<b>Diseases of the circulatory system</b>	10539.2	2970.8	11878.1	4375.7	13863.2	4437.8	15480.1	4700.8
<b>Diseases of the respiratory system</b>	13476.3	11622.8	14545.8	12424.1	18818.5	16147.9	20505.5	18932.1
<b>Diseases of the digestive system</b>	9942.1	6237.8	10419.1	6515.5	15302.8	9380.0	17017.2	10116.0
<b>Diseases of the skin and subcutaneous tissue</b>	1727.6	1306.1	1916.0	1397.8	2487.1	1683.1	2504.6	1896.3
<b>Diseases of the musculoskeletal system and connective tissue</b>	2831.7	1280.6	2997.0	1296.0	3852.7	1515.7	4383.0	1828.3
<b>Diseases of the genitourinary system</b>	4421.5	2831.4	4314.4	2477.3	5457.8	3068.2	6360.6	3504.2
<b>Pregnancy, childbirth and the puerperium</b>	1460.5	1037.9	1834.1	1288.3	2814.5	1977.7	3175.9	2368.8
<b>Certain conditions originating in the perinatal period</b>	3880.5	3355.0	5540.4	4689.5	5018.5	5018.5		
<b>Congenital malformations, deformations and chromosomal abnormalities</b>	169.6	46.2	143.3	46.7	193.6	60.6	181.6	77.2
<b>Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified</b>	493.3	430.2	498.5	437.0	721.4	608.9	1385.8	1273.0
<b>Injury, poisoning and certain other consequences of external causes</b>	1691.7	1512.0	1452.8	1298.4	1932.8	1795.9	2503.7	2343.2

Source: NCDC

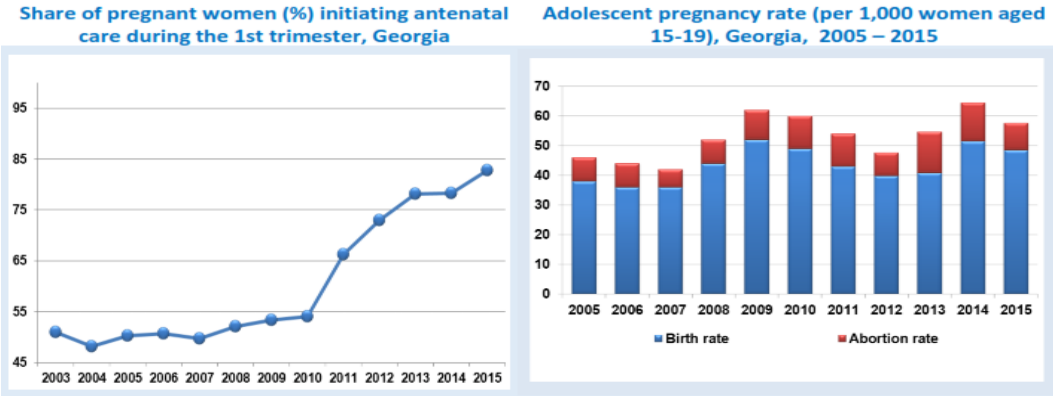
Georgia has reduced maternal mortality rate (MMR) by more than half from 49.2 in 2000 to 31.1 in 2013 per 100,000 live births. Proportion of births attended by skilled health personnel, already high at the time of MDG platform adoption was further increased from 97.4% in 2002 to 99.8% in 2012. Coverage with



recommended four antenatal care visits among pregnant women has been also on rise and totalled 94.2% in 2013 from lower than 60% baseline in 2001. The MICS 2005 reported 97.4% of pregnant women to have visited antenatal care institutions at least once. The high uptake of four antenatal care visits was confirmed by GERHS survey (98.8% in 2005-2009).

Last years, there was a growth of timely initiation of antenatal care, this could be based on the improved financial accessibility of antenatal services (MOHLSA is implementing a state maternal and child health program, which is funding 4 antenatal care visits).

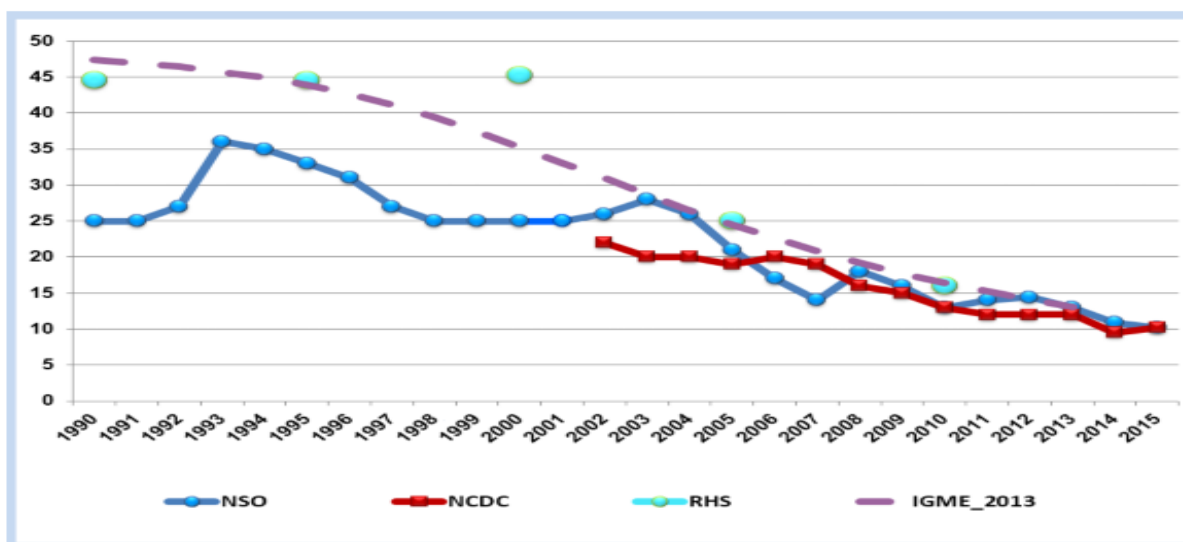
In 2015, a decrease of the total number of abortions has been continued. Last year, the share of abortions in women aged under-20 constituted 3.9% of the total number of induced abortions. The induced abortion rate was high in women aged 25-29 and 30-34. The share of medication induced abortions sufficiently increased.



Source: NCDC, NSO

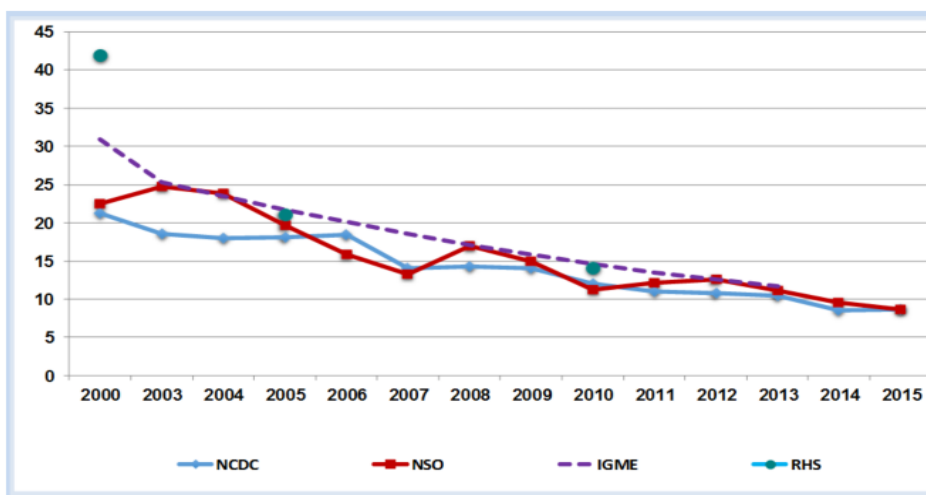
According to official vital statistics (GeoStat), Georgia has substantially reduced under-5 mortality rate from 24.9 in 2000 to 11 in 2015 per 1000 live births. The largest share in child mortality is still attributed to infant mortality (87.5%), the situation that has not changed much since 2000 when the Infant Mortality Rate (IMR) fraction in U5MR was 90%.

Under-5 mortality rate per 1000 live births, Georgia



According to the WHO global data, almost 40% of under-5 deaths occurred in infants. In 2015, in Georgia, this share, according to the National Center of Disease Control and National statistics office, was 83.8%. According to all sources, the infant mortality is declining.

Infant mortality rate per 1000 LB, Georgia



66.7% of mortal cases in infants were caused by conditions originating in the perinatal period. The largest share (73.6%) of the perinatal deaths comes from stillbirths; an adequate ratio of the number of stillbirths to the number of early neonatal deaths is very important. In Georgia, according to the WHO data, stillbirths to early neonatal deaths ratio should not exceed 1.2. In 2015, this ratio equaled to 2.6.

## Article 11&2

### GoG response

#### Education and awareness rising

According to the national education plan (standard) for 2011-2016, the issues related to the health and the safety of the school, are foreseen with the program of several subjects. These subjects are the following:

1. Nature study (I-VI classes, including),
2. Biology (on basic and intermediate levels),
3. Chemistry (intermediate level)
4. Social sciences (on basic and intermediate levels),
5. Sports (I-XII classes, including), and
6. Supervising teacher's program.

**Nature study:** One of the directions of the natural sciences standard from 1<sup>st</sup> to 6<sup>th</sup> class, including is "Human being and environment", which is related to implementation of the elementary rules of the personal hygiene and safe behavior of the student.

According to the subject program in every subsequent class in this direction subsequent rise of knowledge and skills is foreseen. In II and III classes the students study how to live up to the general rules of personal hygiene, and in IV class they start to acquire skills of eating hygiene, to study how the social catering and sales points/trade objects shall comply with the hygiene norms in order to define where the food might be bought. In V class the students are taught the negative factors adversely influencing health state (e.g. polluted environment, unhealthy food, and noise).

**Biology:** In the contents of the biology program of VIII class the health problems related to the system of all the organs are involved and the related hygiene issues. IX class standard foresees study of global and local changes of the environment related to the human health, and also some significant issues of genetics from the point of view of the medicine. By the program of X class the drugs adverse action on the central nervous system as well as the diseases caused by the tobacco. The student receives the information on nutrition value and energy contents of various alimentary products, significance of balanced ration for various age groups. According to the program of biology for XI class the topics related to the infectious diseases are foreseen (their spreading, the ways of protection) and immunization issues. The recommendation contents of the manual of this class cover the following issues: health and disease; pathogens –bacteria, fungi, worms; prevention of diseases – safe water and food; individual and total protection from diseases; fight against infections; antibodies and immune reaction; utilization of immunology; serious infectious diseases (AIDS, tuberculosis) and their prevention; spreading of AIDS in the world and in Georgia.

In X-XII classes (except for the obligatory subjects) the student may select and study among many other optional subjects the subject "Medical biology". According to the standard of this subject the fundamental issues of the modern medicine and biology are foreseen together with their healthcare potential, which needs not only development of treatment and hygiene effective methods but overcoming of the behavioral stereotypes.

**Chemistry:** Chemistry according to the program of X class the student shall relate to the cleanness of the environment and the alimentary products quality – to the human health: a) description of the expected results of chemical agents acting on human organism, and b) on basis of the inscriptions made on labels, searching for the proper sources and analysis to draw conclusion about contents of the substances in the various alimentary harmful for the human health.

**Social Sciences:** According to the program of the social sciences for IX class the problems related to the healthy lifestyle are foreseen (e.g. risks related to unhealthy food, tobacco, drug facilities and alcohol consuming), and also providing healthy safe environment and significance for the human/society wellbeing. According standard of the social sciences for X class, the results to be achieved at the end of the year are evident if, e.g. the student analyzes the reasons causing crime of various types (e.g.: robbery, distribution of drugs, murder, corruption, discrimination, fraud, violence, trafficking). According to the program for X class the personal safety issues are foreseen related to the following: a) in emergency situations to utilization of the appropriate collective and individual protection means, and b) to before-doctor assistance (e.g. first aid while bleeding; limb fixing in case of breakage, vertebrae trauma, and polytrauma, bandaging technique, extraneous antibody in wound).

**Sport:** I-XII classes including physical education and sports standard includes the following directions: health and security. I-V classes foresee study of the elementary rules of the personal hygiene and security. VI class – the student develops the skill for self-protection and providing of other security and avoiding/getting rid of the critical situations. In VII-IX classes the student shall be able to realize the healthy lifestyle as one of the most as one of the most significant condition for achieving of physical and mental health and succeed in the society. In X-XII classes the student may realize the necessity of sports and the healthy lifestyle, as the necessary condition for physical and mental health and therefore successful integration into the society.

**Supervising teacher's program:** In 2010 the Supervising teacher's program was established, according to which "supervising meetings with the students cover the following: healthy lifestyle – personal hygiene, disease spreading sources, healthy food, time organizing, day regime, sports significance, danger of bad habits.

In 2013, UNICEF undertook a research of water, sanitary and hygienic conditions in public schools, in the frameworks of which the conditions in public schools of Georgia were assessed. The results became the basis for the preparation the draft technical regulations and standards. The work on preparation and agreement of the final version of the approval of the technical regulation is underway, which will be approved by the Resolution of the government on Technical Regulation – water, sanitation and hygiene in schools. Doctors were appointed in every public schools of Georgia from September, 2014.

### **Article 11&3**

**Immunization:** Restoration and expansion of routine child immunization has been significant achievement over the last 20 years. The current national immunization schedule includes BCG, Hepatitis B, DPT-HepB-Hib, DPT, OPV/IPV, MMR and DT vaccines. Support from UNICEF and USAID has been significant in funding immunization programme from 1993 through 2006. Vaccine independent initiative has been an important step for the country, when Georgia successfully phased out from UNICEF support in provision of traditional vaccine antigens and maintained self-sufficiency in vaccine and injection supply procurement since 2006. Support from the Global Alliance for Vaccines and Immunization (GAVI) and Vishnevskaya-Rostropovich

Foundation (VRF) enabled the country to start MMR vaccination in 2003. GAVI with Technical Support from WHO is also supporting Georgia in introduction of new vaccines, such as Rotavirus from 2013 and Pneumococcal vaccine from 2014. Since December 2015, in the frame of the Global poliomyelitis eradication, hexavalent vaccine has been introduced in the country. An action plan for transition from the trivalent oral polio vaccine to bivalent vaccine was set up.

Electronic information system Geovacc was updated due to inclusion of new vaccines in the national immunization calendar.

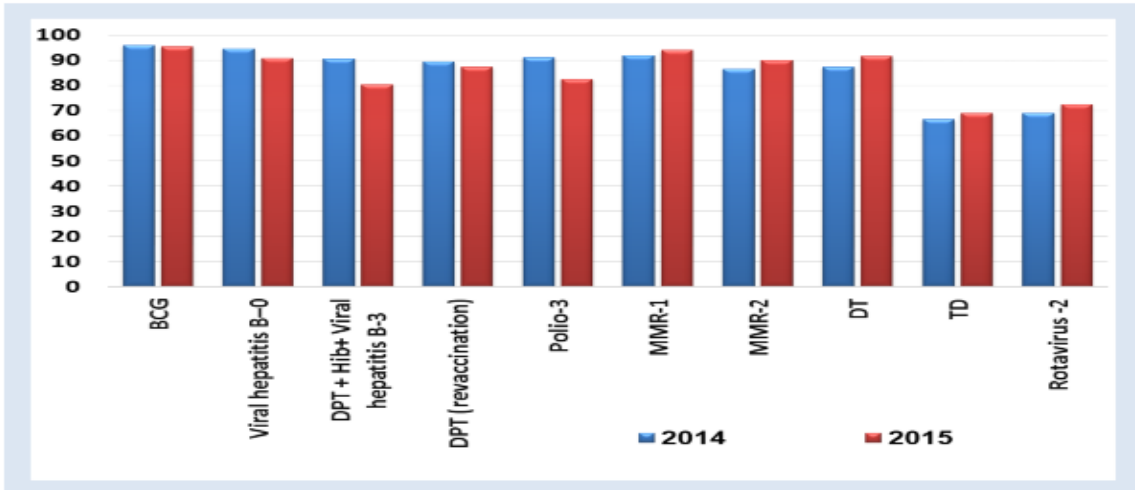
All vaccinations and immunizations included into the National vaccination calendar are free of charge for the population. For immunization of the population State purchases of vaccines, which are prequalified by the World Health Organization, this is a guarantee of a high quality and safe immunization. In 2014, the government paid 800,000 lari for updating the "cold chain" inventory, in order to increase the safety of immunization.

In 2015, compared to 2014, in the frame of the State immunization program, the vaccination coverage rates improved for 10 antigenes. Coverages of vaccination with MMR2, DT, DT and Antirotavirus improved by about 4%; with MMR1 – by 2%; with OPV3 and DPT+Hib+Heb3 – by 9.5% and 11.3% correspondingly. By 2.7% increased timeliness of vaccination.

The recommendations of the World Health Organization and the European Centre for Disease Control to reduce measles morbidity and its elimination are as follows: achievement/maintenance of 95% coverage of the population with two doses of vaccinations and the establishment of supervision for each case (including lab testing) are necessary for elimination of measles.

In Georgia, an increase of the coverage with immunization against measles has been registered over the last years, except for the year 2009. In 2009, the decrease can be explained by the longtime shortage of the vaccine in the country. In 2013, the coverage rate exceeded the recommended by the WHO level and made up 96.5%. In 2015, the coverage rate reached 94%.

**Immunization coverage (%), Georgia**



Source: NCDC

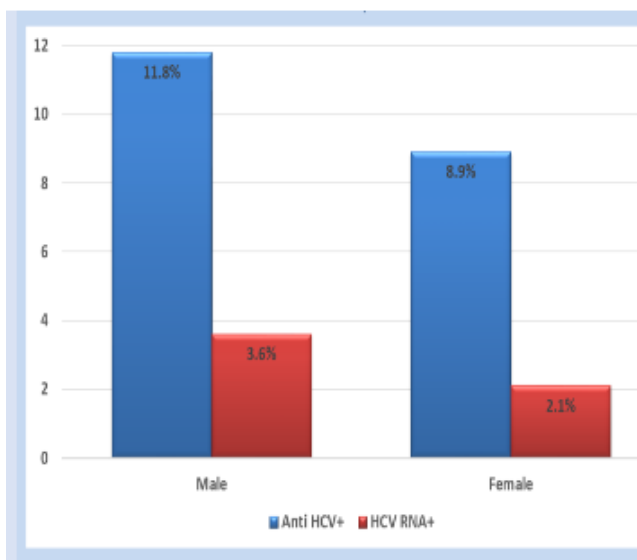
Hepatitis C: Georgian hepatitis C elimination program was started in April, 2015. By July 25, 2016, HCV treatment was provided by 17 health facilities. During this period, more than 36 000 persons presented in one of the provider sites and initiated diagnostic work-up, 15 266 were authorized by state committee to start treatment using modern antiviral drugs; 8 161 completed treatment and 5 137 were eligible for SVR evaluation. The total SVR rate was 90%. All patients diagnosed with HCV can be enrolled in the program and receive treatment.

In 2015, in the frame of the hepatitis C elimination program, the National Center for Disease Control and Public Health, in collaboration with US Centers for Disease Control and Prevention (CDC), conducted the first Hepatitis C serosurvey in country. Totally, 6331 interviews were obtained and 6014 blood samples collected during the survey. According to the preliminary statistical analyses, 7.7% of the population was Anti-HCV positive and 5.4% had the active infection (RNA positive).

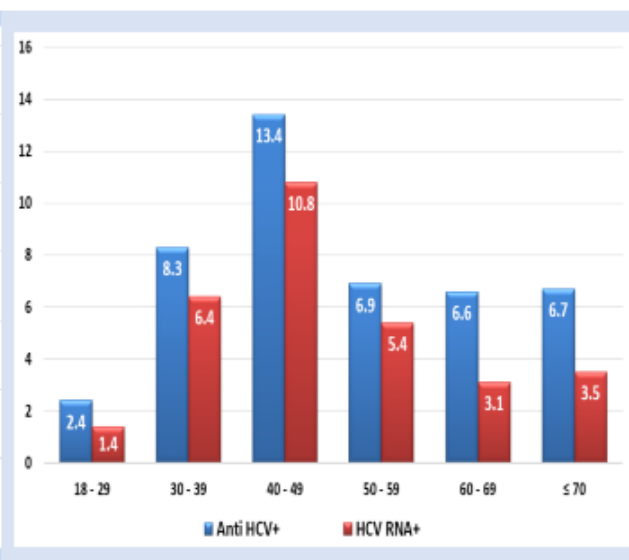
According to the survey results, the most prevalent genotypes are: genotype 1 (40% prevalence) and genotype 3 (34%). Seropositivity was highest among males 30-39 and 40-49 years (22.2%). Potentially, this could be associated with a cohort effect.

To achieve the country’s ambitious elimination goals and streamline efforts aimed at strengthening the national response to Georgia’s hepatitis C problem, a long-term strategy (2016-2020) was developed. This strategy covers different directions including raising awareness of the population, surveillance, prevention, screening, diagnostics, and treatment.

HCV Prevalence by sex (%), Survey 2015



HCV Prevalence by age (%), Survey 2015



Source: NCDC

**HIV, TB, Malaria:** Georgia has attained historic gains in HIV, TB and Malaria response. The country has reached and sustained universal access to ART since 2004, universal access to diagnosis and treatment of TB (including MDR and XDR TB) and is moving forward to Malaria free certification.

Review of the progress in HIV, TB and Malaria response, similar to maternal, neonatal and child health area, reveals that political commitment, resource investment (both domestic and international) and engagement

of international partners and civil society organizations in advocacy and technical support has been critical. In addition all three disease components have been guided by a comprehensive strategic planning exercises and coordinated resource mobilization that largely defined success of the programmes.

Political commitment to successful HIV, TB and Malaria responses has been declared in national development plans and health sector strategies since late 1990s. The global and regional political platforms, including the UNGASS HIV/AIDS Declaration, Stop TB Partnership and Roll Back Malaria provided robust overarching framework for action. The latest National Health System performance assessment and the 2014-2020 strategic framework "Universal healthcare and the quality management for the protection of patients' rights" both position the three diseases among 10 strategic priorities.

In addition to political commitment, since 2002 a national coordination body (CCM) has been established to bring together major stakeholders and to guide development of results-based national strategic plans for HIV, TB and Malaria. Comprehensive planning exercise supported by UN Country Team (UNICEF, UNFPA, WHO and UNAIDS) has been a critical contribution for HIV/AIDS strategic planning. UNICEF and WHO support was also significant in Malaria programming and similar exercise was conducted for TB through WHO, MSF and USAID support.

HIV/AIDS prevention and control interventions are implemented through the HIV/AIDS Prevention and Treatment Program, the Safe Blood and Antenatal Care programmes that includes interventions for Prevention of Mother to Child Transmission (PMTCT) of HIV. The State program on HIV/AIDS targets at early detection of HIV through voluntary counseling and testing for high risk groups, TB patients, STI patients, Prisoners, Patients with hepatitis B and C, patients with clinical signs of HIV/AIDS, etc. The state program on HIV/AIDS treatment covers outpatient and inpatient services, including ART. Government has substantially increased its allocation for Opioid Substitution Therapy. Finally the Safe Blood programme envisages mandatory testing of all blood donors on HIV, hepatitis B and C and Syphilis.

International experts regard the Georgian model of HIV/AIDS treatment and care as the leading experience among countries of former Soviet Union (FSU). HIV/AIDS treatment and care program is implemented by the Infectious Diseases, AIDS and Clinical Immunology Research Center (National AIDS Center), which along with four (Kutaisi, Batumi, Zugdidi and Sokhumi) affiliated regional facilities provides free medical services through the State HIV programme and the Global Fund supported projects.

Special attention is paid to adherence as an important determinant of treatment success. A program to promote and maintain antiretroviral adherence has been developed that includes patient education, adherence monitoring and counseling. Since 2008 home-based adherence support and monitoring program started countrywide through operation of mobile units.

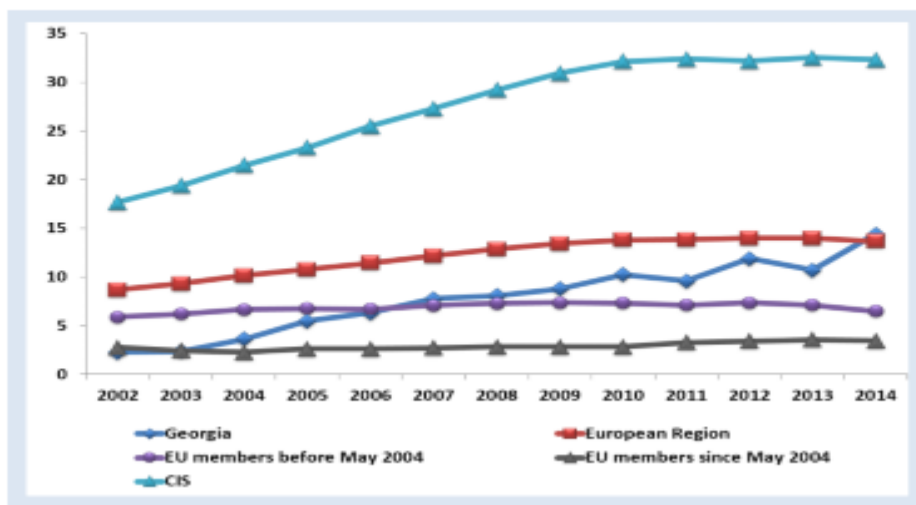
Georgia is advancing towards eliminating vertical transmission of HIV by ensuring universal access to services for the prevention of mother-to-child transmission (PMTCT) of HIV. These services include HIV testing and prophylactic or therapeutic ART for HIV positive mothers and their newborns. Since 2005 there have been no cases of vertical transmission among babies born to HIV positive women receiving ART treatment or prophylaxis.

Georgia has implemented new laboratory technology for rapid detection of TB and drug resistance, allowing the country to identify MDR-TB cases among notifications.

There is a rather high level of HIV/AIDS late detection (30% of new cases are revealed at the AIDS stage), and this represents a serious problem. In the framework of the program of mothers and children the pregnant women antenatal screening is being implemented for AIV-infection, B hepatitis and syphilis, and the confirmatory researches have been implemented among the pregnant women revealed due to the screening. In the framework of the mother and children health program, universally available is antenatal supervising, and the medical care services for pregnant and birth-giving women. According to the same program the pregnant women antenatal screening for AIV- infection, B-hepatitis and syphilis, and the confirmatory research among the pregnant women revealed through the screening is carried out.

Georgia is considered as a country with low prevalence of HIV/AIDS. However, in recent years Georgia has witnessed an increase of the HIV/AIDS incidence. In 2015, there were registered 717 new cases of HIV (incidence per 100,000 population – 19.3), and 94 deaths attributed to AIDS.

### HIV incidence per 100000 population



Source: Center for infectious pathology, AIDS and clinical immunology; WHO Health for All Database

In 2015, 74.7 new cases of tuberculosis per 100,000 population have been registered. This is less than in 2014, although, high, compared to the European region and EU members. 2.3% of all new cases and relapses were registered in prisoners; the share of new cases of pulmonary tuberculosis constitutes 72.2% of new cases of all forms of tuberculosis.

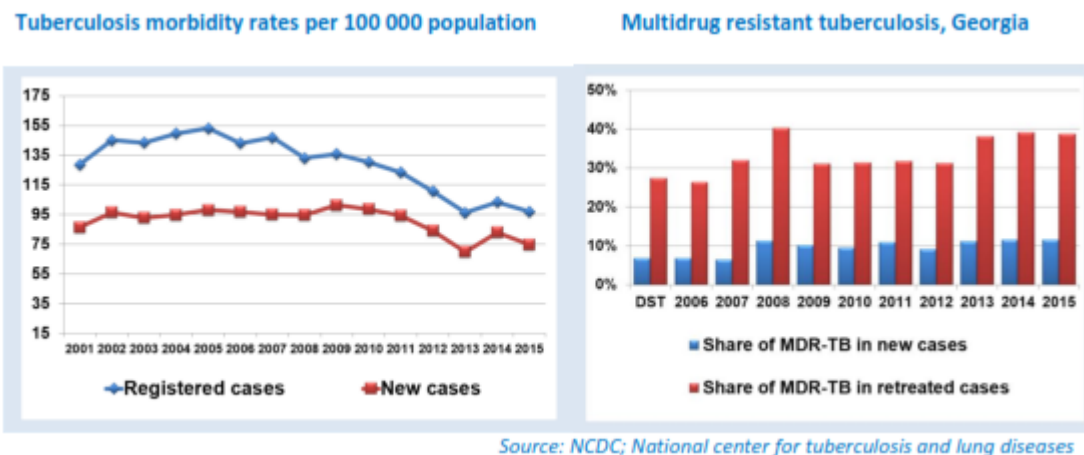
In 2015, according to the National Statistical Office of Georgia data, mortality caused by tuberculosis was 1.8 per 100,000 population.

The “successful treatment” of the new cases of pulmonary BK+ tuberculosis is a good assessment characteristic of the general tuberculosis control and management. In 2005, “successful treatment” of new cases of pulmonary BK+ tuberculosis reached only 64.1%. In 2014 and 2015, this indicator increased up to 81% (2013 cohort).

According to the World Health Organization estimates, Georgia belongs to the group of countries "with a high burden" of MDR-TB.



In 2015, 11.6% of the new pulmonary tuberculosis cases (168 cases) and 38.8% of the retreated pulmonary tuberculosis cases (186 cases) have been multidrug resistant.



**Counselling and Screening:**

Under the state program for the early revealing of the diseases foresees the following cancer screening programs have been implemented in the country:

- Breast cancer screening for 40-70-year-old women;
- Cervical cancer screening for 25-60-year-old women;
- Prostate cancer screening for 50-70-year-old men;
- Colorectal cancer screening for 50-70-year-old population.

**Number of tests performed in the frame of cancer screening program**

	2012	2013	2014
Breast	17576	20121	21865
Cervix	27374	26111	23532
Prostate	3424	5900	6178
Colon	4691	6025	6417

Epidemiological safety program carries out the timely detection and prevention of communicable and non-communicable diseases in children and in adults on a primary healthcare level. The mentioned program provides the surveillance of sexually transmitted diseases and HBsAg, antiHBc, antiHCV study of patients with the diseases non-associated viral hepatitis and its risk factors. Surveillance component for nosocomial infections, diarrheal diseases and meningitis and hemorrhagic fever have been launched for two years.

Mental health: From 2010, fundamental reform of the mental health system started in Georgia, which provides fundamentally different institutional approach to the mental healthcare issue from the traditionally existing practices and covers the following directions:

1. Relevant infrastructural development/arrangement;
2. Supporting the professional development of the medical personnel of mental health – nurses, doctors, also other auxiliary specialists.
3. Provision of acute and emergency treatment in hospitals of general profile;
4. Construction and equipment of shelters for long-term and rehabilitation services;
5. Promotion the development of psychiatric services for children and adults;
6. Strengthening the primary healthcare and increasing the role of doctors and nurses in the mental healthcare field;
7. Development of community-based services – in order to provide geographic and financial access of all patients to the modern outpatient services, before hospitalization and after hospitalization.

The most important news, conducted in the frameworks of the reform are:

- Establishment of acute psychiatric departments in facilities of general profile;
- Arrangement of service centers for the chronic patients, with provision of relevant living conditions and medical services;
- Establishment of child psychiatric inpatient departments;
- Promotion of the development of the community-based mental health, including the crisis intervention and home care service coverage;
- Promotion of the professional development for the mental healthcare professionals and their equipment with the modern textbooks.
- Revision/renovation of the guidelines and protocols.

Establishment of the children's psychiatric hospitals in multi profile clinics are the most noteworthy from here, as the parents of children and adults always refrain from bringing the patients in a psychiatric facility, because of the stigma in society and the living conditions. The children's psychiatric department was equipped with the modern medical and entertainment facilities. Also, a multidisciplinary team was established to provide the children and adults with the relevant medical services. The state concept for mental healthcare for 2014-2024 has been prepared and approved by the Parliament. With the mentioned concept, Georgia undertakes to provide the psychiatric healthcare for the persons with mental disorders in less restrictive environment, as near to the living place as possible or at home, according to the individual needs; maximally protect their rights and their equal, full and effective participation in community life.

Tobacco Control Measures: Georgia, according to the World Health Organization, is one of the countries with the highest level of tobacco consumption in the European region and the world. In Georgia, 55% of males and 5% of females are smokers. Meanwhile, the level of alcohol consumption in Georgia is not considered problematic.

According to the Hepatitis C survey (CDC/Atlanta, CDC-FETP, NCDC, 2015), the share of daily smokers is 27.1% (in males – 51.7%; in females – 6.0%).

In 2014, a Global Youth Tobacco Survey (GYTS) was conducted under the aegis of the WHO. According to this survey:

- ✓ 42% of respondents are under the second-hand tobacco smoking at home;
- ✓ 55% of respondents are affected by the second-hand tobacco smoke in the public space;
- ✓ 77% of respondents buy cigarettes at the stores, from outside vendors or in kiosks;
- ✓ 60% of respondents have seen anti-tobacco messages in the media;
- ✓ 50% of respondents have seen tobacco advertisements or promotions in the sale areas;
- ✓ 70% of respondents think that the second-hand smoking is harmful for health;
- ✓ 79% of respondents support ban of indoor smoking in public places.

In 2015, the European School Survey ESPAD 2015 EMCDDA, NCDC was conducted to study alcohol, tobacco and other drug use. According to the survey data:

20.8% of respondents had tried smoking at the age of 13 years or younger (28.2% of boys and 12.3% of girls); 3.7% started daily smoking (5.7% of boys and 1.5% of girls);

- ✓ 18.7% of students (25.0% of boys and 11.5% of girls) had ever smoked e-cigarette; 8.5% of
- ✓ respondents (12.6% of boys and 3.9% of girls) had smoked e-cigarette within last 30 days;
- ✓ 32.8% of the students (42.9% of boys and 21.5% of girls) had ever smoked hookah; 14.4% of them (22.1% for girls and 5.7%) had smoked hookah within last 30 days;
- ✓ The majority of students (83.2%) replied that their friends smoke tobacco (84.7% of boys and 82.3% of girls);
- ✓ for 59.5% of students it is easy to get cigarettes.

The World Health Organization Framework Convention on Tobacco Control (WHO FCTC) is the first international health treaty negotiated under the auspices of WHO and was adopted in 2003. It has since become one of the most widely and rapidly embraced treaties in the history of the United Nations, with 176 Parties to date. Georgia ratified the WHO FCTC on 14 February 2006 and it entered into force for Georgia on 15 May 2006.

Parliament of Georgia ratified WHO FCTC in 2005, which went into force in May 16, 2006. With this, country took an international responsibility to carry out requirements of the Convention. Only a very few part of the requirements have been carried out so far.

Georgia had adopted legislative and executive measures on tobacco control even before it ratified the Convention. Tobacco control was a part of Consumer Right Protection (1996), Health Protection Law (1996), Law on Advertisement (1998), Presidents Decree on Tobacco Control Measures (2000), and Tobacco Control Law (2003). The current Law on Tobacco Control was passed in 2010, but the main provisions had already been adopted in 2008. The Tobacco Control Law is a major step in implementation of the Convention. It bans smoking in certain public places and all public transport, regulates tobacco products packaging and labeling, sales of tobacco products etc. The Law on Advertisement bans tobacco advertising through cinema, radio, video services and television. However, enforcement of all those provisions remains a challenge and there are a number of provisions that need to be amended to be fully in compliance with the Convention and its guidelines.

On 15 March 2013, the Government of Georgia adopted a decree on the creation of the State Committee on Tobacco Control to strengthen tobacco control in Georgia and, specifically, with a view to ensuring the effective implementation of the country's 2010 Law on Tobacco Control. The Committee is chaired by the Prime Minister, and its deputy chair is the Minister of Labour, Health and Social Affairs. Several sectors of the Government are represented, including the Ministries of Education and Science; Justice; Internal Affairs; Sport and Youth Affairs; Finance; Economy and Sustainable Development; Regional Development and Infrastructure; and Agriculture. Other members of the Committee include members of Parliament, the Patriarchate of Georgia, media consortiums, the Georgian Public Broadcaster and relevant international and nongovernmental organizations. The National Centre for Disease Control and Public Health will serve as the Secretariat of the Committee. Tobacco Control National Strategy and Action Plan 2013 -2018 have been elaborated by the working group of the Committee. The strategy has been approved by the Government of Georgia on July 30, 2013 and the Action Plan on November 29, 2013; this will be followed by the approval of amendments in 5 relevant laws (Administrative Offense Code of Georgia; Tobacco control Law of Georgia; Law on Advertisement of Georgia; Broadcasting Law of Georgia; Tax Code of Georgia) in the nearest future and implementation of the Tobacco Control State Programme according to the national action plan.

Tobacco Control National Action Plan includes measures which are in line with the WHO FCTC and numbers of them are particularly targeting prevention of smoking in youth. Such activities include comprehensive tobacco ban advertisement, promotion and sponsorship, educational campaigns on tobacco and inclusion of tobacco education in secondary and graduate education system, strengthening fining mechanism on violations of selling tobacco to minors or near the educational facilities, awareness raising campaigns in collaboration with Ministry of Sport and Youth, public broadcaster and other relevant agencies; annual raise of tobacco tax, enforcement of partial smoking ban in public places and preparation of total ban after 2015 etc. Implementation of above mentioned activities is planned to be started in the current year as soon as tobacco state program is approved and parliament passes new bills on tobacco control.

**Drug abuse:** In recent years, due to lack of coordinated registration and analysis regarding data about drug users and drug abusers, today, the country does not have statistically reliable indicators about the number of drug users and drug abusers. There are about 40000 intravenous drug users that is 1.5% of the population aged 15-64. The most commonly used intravenous drugs in the country belong to the group of opioids.

Within the framework of the harm reduction program two researches of problematic consumers have been implemented: the first in 2008 and the second in 2011.

The new study among young people based on ESPAD methodology will be conducted by the National Center for Disease Control and Public Health in 2016 in close cooperation with the Ministry of Education and Science with co-financing of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), NCDC will co-finance the survey partially.

The GFT is supporting BSS and population size estimation studies among PWIDs with total budget of 340 000 GEL. The activity is implemented by the "Curatio International Foundation" and the results and relevant report will be available by June 1, 2015.

In 2010 was adopted national drug strategy. Intersectoral action plan 2016-2015 was adopted by the Inter-Agency Coordinating Council on Combating Drug Abuse on the meeting of the council on 4, December 2013.

Measures are undertaken in order to implement action plan by different stakeholders in all directions of drug policy. Efforts undertaken by the different agencies are reported in detail to Secretariat of Inter-Agency Coordinating Council. For this reason was developed the evaluation plan for monitoring and evaluation of the Action Plan with assistance of independent experts.

All Agencies, participated in implementation process, prepare quarterly report of the implementation of 2014-2015 Action Plan. After that, Inter-agency Council is convened with the participation of all relevant agencies to discuss necessities and gaps in the process of implementation of the national action plan. In the process of evaluating progress of implementation inputs of the individual experts, international organizations and NGOs involved in the activities of the Council are be taken into account.

**Sanitation:** On January 9, 2014 Order N01-4/O on establishment of the working group in order to revision and renovation of sanitary and hygienic normative basis was approved by the Minister of Labour, Health and Social Affairs of Georgia and the main directions of the hygienic norms were determined. Also the inventory of the hygiene normalization and public health laws in force, action plan 2014-2016 for provision of the development the public health sector regulation acts (technical regulations, hygiene norms, standards and others) and draft policy determining documents was implemented.

Government resolutions on Hygiene norms in the technical regulations field:

- ✓ Resolution N83 of the Government of Georgia of January 16, 2014 on approval of the technical regulation of "Medical radiology diagnostic procedures and radiation protection standards during medical treatment";
- ✓ Resolution N58 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of potable water";
- ✓ Resolution N72 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of sanitary-hygienic norms of food containers";
- ✓ Resolution N74 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of mandatory standards for the operation of the blood transfusion facilities";
- ✓ Resolution N67 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of maximum permissible concentrations of fibrogenic, mixed effect aerosols and metals in work zone air.
- ✓ Resolution N64 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of sanitary rules for waste collection, storage and treatment from therapeutic and prophylactic facilities";
- ✓ Resolution N69 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation of hygiene requirements raised against the micro climate of industrial facilities";
- ✓ Resolution N63 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation for food fortification";
- ✓ Resolution N77 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation for the sanitary regulations for working with pathogenic biological agents (pathogenic microorganisms)";
- ✓ Resolution N73 of the Government of Georgia of January 15, 2014 "on approval of the technical regulation for the hygienic assessment of materials, reagents, facilities and technologies, used in water supply system";

- ✓ Resolution N70 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for maximum permissible concentration of the content of harmful substances in the air of the working zone”;
- ✓ Resolution N78 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for sanitary rules and standards of food organization in pre-school institutions”;
- ✓ Resolution N62 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for the sanitary rules disinfection of potable and industrial water of centralized and local water supply with chlorine and disinfection of water supply facilities”;
- ✓ Resolution N34 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for the major sanitary rules for working with the radioactive substances and other sources of ionizing radiation”;
- ✓ Resolution N24 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for the organization and implementation rules for disinfection, disinsection, deratisation and deactivation”;
- ✓ Resolution N28 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for the radiation safety standards in Georgia”;
- ✓ Resolution N26 of the Government of Georgia of January 15, 2014 “on approval of the technical regulation for the sanitary rules of water sampling”;
- ✓ Resolution N416 of the Government of Georgia of January 31, 2013 “on approval of the technical regulation for the arrangement and exploitation rules and standards of municipal solid waste landfills”;
- ✓ Resolution N425 of the Government of Georgia of January 31, 2013 “on approval of the technical regulation for the protection of Georgian surface water from pollution”;
- ✓ Resolution N438 of the Government of Georgia of January 31, 2013 “on approval of the technical regulation for the rules and standards for arranging the radioisotope laboratories and usage of open radiopharmaceutical preparations”;
- ✓ Resolution N428 of the Government of Georgia of January 31, 2013 “on approval of the technical regulation for the marks and labels to the harmful chemical substances”;
- ✓ Resolution N85 of the Government of Georgia of January 16, 2014 “on approval of the regulatory technical standards of some spheres”.
- ✓ Resolution N347 of the Government of Georgia of May 13, 2014 “on approval of the especially dangerous pathogens and biological incident response plan”
- ✓ Resolution N01-101/O of the Minister of Labour, Health and Social Affairs of Georgia of May 13, 2014 “on establishment of the coordination council for the development and implementation of the national antimicrobial resistance strategy”;
- ✓ Work on national antimicrobial resistance strategy is underway, which will be approved in the near future.

Georgian Law on “Traffic Security” defines the legal basis for the security providing of the traffic on the territory of Georgia. With the purpose to prevent and manage the traffic accidents the state program for providing of the traffic security is acting in the country.

## Article 12 – The right to social security

With a view to ensuring the effective exercise of the right to social security, the Parties undertake:

1. to establish or maintain a system of social security;
2. to maintain the social security system at a satisfactory level at least equal to that necessary for the ratification of the European Code of Social Security;
3. to endeavor to raise progressively the system of social security to a higher level;
4. to take steps, by the conclusion of appropriate bilateral and multilateral agreements or by other means, and subject to the conditions laid down in such agreements, in order to ensure:
  - a. equal treatment with their own nationals of the nationals of other Parties in respect of social security rights, including the retention of benefits arising out of social security legislation, whatever movements the persons protected may undertake between the territories of the Parties;
  - b. the granting, maintenance and resumption of social security rights by such means as the accumulation of insurance or employment periods completed under the legislation of each of the Parties.

## Article 12§1

### GoG response

Submitted below information include answers to the relevant conclusions and questions of the European Committee of Social Rights.

#### Risks covered under the social security system:

##### *Pensions*

Since September 1, 2015 amount of state pension for (women aged 60 and men 65) has been raised from 150 GEL up to 160 GEL and since September 1, 2016 up to 180 GEL.

Based on the law “on the Development of the Mountainous Regions of Georgia”, since September 1, 2016, social package and pensions for persons permanently residing in mountainous regions of Georgia has increased by 20% of amount of the social package.

**Table 1: The number of pensioners**

Years	Old-age pensioners
2012	682 886
2013	686 675
2014	697 095
2015	707 709

### *Sickness benefit*

Pursuant to Order N 87/n, February 20, 2009 “on Rules for appointment and provision of aid for Temporary Incapacity for work” of the Minister of Labour, Health and Social Affairs, paying of the sickness benefit is the liability of an employer. All employed persons are guaranteed for sickness benefit and its amount equals to 100% of his/her salary for the whole period of sickness. Percentage of persons insured (all employees) against sickness out of the total active population (Labour force) as of 2015 was 88 %.

The guarantees are ensured pursuant to the following acts: „Labour Code of Georgia”, „Order of the Minister of Labour, Health and Social Affairs of Georgia N 281/n of 2007” “on temporary incapacity appraisal and rules for providing sick-leave certificate”, Order N 87/n, February 20 of 2009 of Minister of Labour, Health and Social Affairs “on Rules for appointment and provision of aid for Temporary Incapacity for work”.

### *Work injury*

Pursuant to the „Labour Code of Georgia”, „Civil Code of Georgia”, Law on “Medical and Social Appraisal” and Governmental decree #45, March 1, 2013 on the “Rules of remuneration for damage caused to worker's health”, employers are responsible for providing employees with a safe work environment and if the damage to the worker’s health is caused by the fault of the employer which is affirmed by court, employer is liable to reimburse any damage.

### *Family benefit, Maternity benefit*

By the resolution №262, on March 31, 2014, Government of Georgia approved “Demographic situation promotion program”. The aim of the program is to improve the demographic situation in Georgia, especially in rural areas. Beneficiaries of the program are third or next children born after June 1, 2014, whose biological mother/family lives in the region, where annual average natural growth indicator is negative (mortality rate exceeds the birth rate) . Amount of the benefit is 200 Gel in mountainous regions and 150 Gel in non-mountainous regions. According to the law on “Development of Mountainous Regions”, children born after January 1, 2016 whose one of the parents permanently resides in a mountainous region gained the right to receive the monetary social assistance. Amount of the assistance for the first and second child equals to 100 Gel per month and 200 Gel for the third and following child, until the child reaches 2 years old.

Amount of the maternity benefit, for the whole period of leave from January 1, 2014 has increased from 600 Gel up to 1000 GEL. The benefit is funded by the state budget.

It is worth to mention also, that, very important support for families is, that kindergartens are free of charge for every child throughout the country and are financed by the municipal budgets.

Before the introduction of the targeted social assistance scheme, according to the governmental decree N145 of 2006 „On Social Assistances” the family benefit has been given to certain categories of families (disabled children under age of 18, families with 7 or more children etc.), but after establishment of targeted social assistance benefits, in 2015 it has been abolished.



### *Reintegration allowance*

Reintegration allowance is the cash benefit, given to biological family of a child, who takes back a child from the specialized institution to the family and provides adequate care. Reintegration allowance amounts to 90 GEL per month. 130 GEL – in the case of disabled child. Number of reintegrated children by years: 2012-474, 2013 – 489, 2014 – 507, 2015 – 525, 2016 – 450.

### *Household subsidy*

Household subsidy is provided for covering household-utilities (electricity, water, etc.) expenses. The rights to the household subsidy have certain categories: Veterans of the World War 2, family members of persons suffered during the breakup of the peaceful demonstration for independence of Georgia on April 9, 1989 in Tbilisi, people recognized as victims of political repression and handicapped members of their families, etc.

### *Targeted Social Assistance (Subsistence allowance)*

Law of Georgia “on Social Assistance” stipulates that subsistence allowance is considered as a tool for improvement of social and economic conditions of poor families. Pursuant to the Decree N758 of the Government of Georgia, dated from December 31, 2014 “on Approval of the methodology on evaluation of Social and Economic condition of the Socially Vulnerable Families (households)”, examination of the households are carried out by the special methodology that evaluates the social-economic condition of households. As the result of the evaluation, a general database of vulnerable families has been formed. In 2014 a new methodology for evaluation of social-economic conditions of families was elaborated and enforced in 2015. The new methodology better reveals the needs of children, disabled and those suffering from serious illness. Subsequently the system better meets their needs.

Households registered in the database, whose rating score is less than certain level defined by the government, are eligible to receive the allowance.

Government Decree N 145 dated of July 28<sup>th</sup> of 2006 “on Social Assistance” regulates the amount of the allowance. Since 2015 allowance is distributed according to the followed below principle:

score	GEL/per person in the household
<30,001	60
30,001-57,000	50
57,001-60,000	40
60,001-65,000	30
65,001-100,000	0

## Article 12§3

### GoG response

According to the Decree N279, July 23 of 2012 “on distribution of social package”, the monetary assistance is paid to persons with disabilities, to children, to vulnerable persons and to persons recognized as victims of repressions, to persons participating at hostilities for the territorial integrity, freedom and independence and to other specific categories.

Amount of the social package, for persons with severe disabilities was 150 GEL till September 1, 2015 and after this date its amount raised up to 180 GEL. Social package for children with disabilities has increased also from 100 Gel up to 180 GEL.

For persons with the significant forms of disabilities, for persons who remained single due to breadwinner’s death, for persons with moderate forms of disability since childhood and for persons recognized as victims of political repressions, disbursement’s amount equals to 100 GEL.

Based on the law “on the Development of the Mountainous Regions of Georgia”, since September 1, 2016, social package for persons living in mountainous regions of Georgia has increased by 20% of amount of the social package.

**Table 2: The number of beneficiaries of the social package according to certain categories**

Scope of persons	2012	2013	2014	2015
Disabled persons	122 055	122940	123722	123809
Lost a breadwinner	28 063	27080	25844	24832
Politically repressed	1567	1284	1026	763
Recipient of a state compensation	9464	9411	9707	9665
Recipient of household subsidy	12724	9467	8533	8095
With acquired right (other category)	231	150	98	62

State makes emphasis on overcoming challenges of distribution of social funds and covering of social risks, reduction of poverty and vulnerability..

Since 2013, with the support of UNICEF, in order to better reflect children’s needs, has started work on a new methodology of assessment of social-economic conditions of families and new administrative scheme. In 2014 a new methodology for evaluation of social-economic conditions of households was elaborated and enforced in 2015.

The new methodology makes more emphasis on income and on property that brings income. Consequently, a beneficiary can become a family, not having enough income or property that brings income: other apartment, agricultural lands, car, etc. Household Appliances, such as: refrigerator, washing machine, stove, heater, conditioner, TV do not influence on evaluation. Rating score does not depend on subjective evaluation of the assessing persons, the methodology considers family needs, family members special status (persons with disabilities, persons suffering with chronic disease, children, pensioner etc.).

**Table 4: Number of persons, receiving subsistence allowance according to years**

Number: (thousand)	2012	2013	2014	2015
<b>Persons</b>	501,400	453,900	421,300	389,600

*Assistance for internally displaced, refugees and persons with humanitarian status*

Monthly assistance for internally displaced, refugees and persons with humanitarian status equals to 45 Gel.

**Table 5: The number of refugees and IDPs according to years**

Category	2012	2013	2014	2015
IDP	226 897	231 218	218 364	225 470
Refugee	306	325	361	1116
<b>Total</b>	<b>227 203</b>	<b>231 543</b>	<b>218 444</b>	<b>226 586</b>

*State compensation and academic scholarship*

According to the Law of Georgia on “State compensation and Academic Scholarship,” the State compensation is paid to the certain categories of persons. These are mainly the retired persons from military structures, former servants of Ministry of Justice, former members and former servants of the Parliament, former servants of the civil aviation, judges of Supreme Court, family members of a former highest political persons, diplomats with high rank and etc. Amount of the compensation depends on the age, specific state rank, length of service, status of disability and some other indicators.

Since January 1st of 2015, the compensation for families of security service officers, who died while executing duties, has increased from 500 Gel up to 1000 GEL.

*Domestic violence*

Regarding the domestic violence, important amendments were made in 2014 to the Law of Georgia on “Elimination of Domestic Violence, Protection and Support to the Victims”. The term „Neglect“ has been defined as a form of violence. Issues related to the identification of domestic violence cases against minors

(children), rights and protection guarantees of the victims of domestic violence, reporting procedures on the facts of domestic violence have been defined.

LEPL State Fund for Protection and Assistance of (Statutory) Victims of Human Trafficking (hereinafter – the State Fund) is the responsible body for provision services for victims.

Main functions of the State Fund are:

- Protection and assistance of victims of human trafficking, providing compensation pursuant to the legislation of Georgia;
- Ensuring the protection, assistance and rehabilitation of victims of domestic violence;
- Creating decent living conditions for the elderly, persons/children with disabilities and children devoid of parental care;
- Ensuring the assistance and rehabilitation of victims of sexual violence.

Accordingly, from the 1<sup>st</sup> of January 2013 the State Fund provides service to victims of human trafficking, victims of domestic violence, children without care, elderly, persons with disabilities (including children). Measures to fight against domestic violence, victim rehabilitation and violence prevention was laid out in 2013-2015 National Action Plan on the Fight Against Domestic Violence and the Protection of Victims of Domestic Violence in Georgia, approved by the Ordinance N17/07/01 of the President of Georgia of July 17, 2013. The Plan was renewed and 2016-2017 was determined as its new term.

Two shelters for victims of trafficking operating in Batumi and Tbilisi and 4 shelters for victims of domestic violence (Tbilisi, Gori, Kutaisi, Signaghi) are under the control of the State Fund. The shelters are accessible for the persons with disabilities. Shelter services are adapted to the requirements for juveniles needs and their formal and informal education is performed in the shelters.

*Services for children living and/or working on the streets* includes operation of four mobile street teams comprised of a social worker, a psychologist, and a peer educator (a child previously living and working on the streets), who serves as a mentor, who makes initial contact with children on the streets and directs them to the program's services. Program also funds six day care centers and four 24-hour shelters, which prepare children to reintegration into biological families or alternative family type care. Current services of the sub-program to provide "homeless" children with shelter, as of June 2016:

- 115 beneficiaries were in day care centers, each month 96 beneficiaries uses this service;
- 37 beneficiaries were in shelters, during the month 34 beneficiaries;
- hotline service received 73 calls, from which 24 were transferred to 112 service. The mobile groups responded to 46 phone calls. Only in 3 cases the mobile groups couldn't respond.

From 2014 until now:

- 14 beneficiaries were moved to small group homes from shelter;
- 16 beneficiaries were moved to foster care from shelter;
- 10 children were reintegrated;

- 90 beneficiaries and their family members received support in obtaining documentation;
- 38 beneficiaries' families involved in emergency assistance subprogram for families with children in crisis situations ;
- 56 beneficiaries enrolled in school.

*Shelter for Mothers and Children* is financed within the state social program. According to the program, services is provided to mothers encountering different problems or pregnant women not less than on their 26<sup>th</sup> month of pregnancy, with their child (children) of age 10 being under the risk of abandonment. The program envisages the provision of 24 hour shelter, fostering formal and informal education and psychological services. The services are provided in two biggest cities of the country and the total number of beneficiaries is 73.

**Article 14 – The right to benefit from social welfare services**

With a view to ensuring the effective exercise of the right to benefit from social welfare services, the Parties undertake:

- 1 to promote or provide services which, by using methods of social work, would contribute to the welfare and development of both individuals and groups in the community, and to their adjustment to the social environment;
- 2 to encourage the participation of individuals and voluntary or other organisations in the establishment and maintenance of such services.

**Article 14§1**

**GoG response**

*System of Social Services*

The centralized system of Social Services is functioning throughout the Georgia. LEPL Social Service Agency, operating under the control of the Ministry of Labour, Health and Social Affairs of Georgia is implementing social programs. LEPL Social Service Agency has territorial units (branches) in every districts and regions. A person in order to receive service should apply to the social service agency's local branch by place of residence.

Inclusion in social services mainly is carried out based on decisions taken by the regional boards of the LEPL Social Service Agency, that takes into consideration the conclusion prepared by the social worker. Regional boards are formed by the following specialists: lawyer, doctor, local government representative, non-governmental organization representative, representative of the resources center of the Ministry of Education and Sciences, etc.

Social services offered by the state are available without any restriction and exception. Services are provided throughout the country (except of occupied territories). Persons living on the occupied territories without any restriction and difference can use all services provided on the territories controlled by the government. Beneficiaries of the services are: all citizens of Georgia, persons with the document verifying citizenship (including children under 18 – personal number or birth certificate), the citizens with the neutral

ID card, neutral travel documents and persons having status of „without Georgian citizenship", persons seeking shelter in Georgia, persons with refugee or humanitarian status.

Local municipalities within the frames of their own budgets implement and fund additional social programs for the local population.

Municipalities of Georgia are financing some additional social programs: support program for vulnerable families and large families with newborns registered in the database of vulnerable households, assistance programs for children of persons who became disabled in the fight for Georgia's territorial integrity; co-financing of medical services for persons in economic crisis; Financing the electricity bill, one-time monetary assistance to persons with disabilities, including children, medical assistance program for persons with disabilities, vulnerable families, transportation of children with disabilities to the place of service provision etc.

In 2015, 239 social workers operated under the umbrella of The LEPL Social Service Agency. Number of social workers has increased by 28 in 2016. Their working activity includes issues of domestic violence and violence against children. Specifically trained Social workers support victims of HTB, they work under the LEPL State Fund for Protection and Assistance of (Statutory) Victims of Human Trafficking. Social workers working under LELP Social Service Agency will be retrained in 2016 in child abuse and neglect issues.

Basic social services financed by the state budget:

- Children's early development
- Emergency aid for families with children in the crisis situations;
- Children's rehabilitation/habilitation;
- Day care centers for children and for adults with disabilities;
- Shelters to mothers and children;
- Promotion of deaf persons communication;
- Small group homes for children deprived of parental care;
- Foster care;
- Community living for disabled persons;
- Provision of day care and shelters for homeless children;
- Home care for children with severe and profound mental disabilities;
  - provision of auxiliary means, (wheelchairs, prosthetic and orthopedic facilities, hearing devices, cochlear implants, crutches, canes, walking (white )sticks for blind people and portable frameworks.

#### *Deinstitutionalization*

The government of Georgia still continues deinstitutionalization of large child care institutions. Optimization of large child care institutions was conducted in 2011-2015. 12 large institutions for children were closed in 2011, 5 - in 2012; 2 - in 2013; 1 Children's Crisis Center for children aged 6-18 was closed in 2014, and 1 home for children with disabilities in 2015.

Currently two medium size institutions for children with disabilities are operating. As of 2016, in both of these facilities are accommodated 86 children with disabilities.

For continuing the process of deinstitutionalization and gradual closure of the large child care institutions, on January 14, 2016, a Memorandum of Understanding was concluded between the LEPL Social Service Agency of the Ministry of Labour, Health and Social Affairs of Georgia and UNICEF. The MOU aims at establishment and development of alternative services for children with disabilities, resembling to the family environment. Based on the MOU, in 2016 one pilot small family-type house is planned to start operation for children with disabilities, which shall trigger the development of other services.

#### *Quality of services and monitoring*

With the purpose to monitoring of services, by the end of 2011 the research of the services implemented in the framework of the state programs in 2009, 2010 and 2011 was carried out by the independent organization "BCG Research". Results of the research were taken into account and financing mechanisms, activities and approaches in some services in 2012 have been changed. Quality of provided goods and services increased.

In 2013, pilot project - monitoring of child care services (32 small group homes for children, 20 day care centers, 36 foster care families) was carried out jointly by the Ministry of Labour, Health and Social Affairs of Georgia and NGOs. Service monitoring instrument has been elaborated and the instrument's examination/testing has been conducted within the project. Compliance of the provided services with the child care standards was evaluated and recommendations have been issued for each provider and state entity.

Taking into accrued experience, since January 2014, the Ministry of Labor, Health and Social Affairs of Georgia has established the unit at the Department of the Social Protection - Programs Monitoring Division, which carries out the permanent monitoring of provided services in order to verify compliance with the standards, ensure quality of services at the sufficient level and to develop recommendations for service providers.

During 2014-2015 years, the division carried out the monitoring of 21 day care centers for children and 30 child care residential institutions (foster care, small group homes, child orphanage, and crisis centers).

In 2015, the unit monitored 13 community based services, 5 residential institutions, 15 day care centers serving persons with disabilities. Appropriate recommendations were given to all service providers and all of them submitted reports on implementation of the recommendations.

Most of the services are financed through the voucher principle. Beneficiaries have choice to select the serving organizations, and therefore, indirectly determine participation of the providers into the service implementation and in this way they influence on the quality of services.

#### *Personal data protection*

In order to ensure personal data protection, Georgia ratified Council of Europe Convention 108<sup>th</sup> for the Protection of Individuals with regard to Automatic Processing of Personal Data in 2006 and its additional Protocol in 2013.

In 2012 the Law of Georgia on Personal Data Protection entered into force. The Law is in full conformity

with the UN, Council of Europe and EU standards on personal data protection. The purpose of the Law is to ensure the protection of human rights and freedoms, including the protection of the right to privacy, in the course of processing of personal data. The Law of Georgia on Personal Data Protection defines the principles (for example the principles of proportionality and adequacy) and grounds for personal data protection. Furthermore, the Law defines the rules for processing of general personal data as well as special categories of data (e.g. the information concerning the state of health of an individual). The Law sets higher protection standard for a special category of data. In particular, the Law as it stands now stipulates that processing of special category of data shall be prohibited, unless there is a written consent of the data subject or under the circumstances defined under paragraph 2 of Article 6 of the Law of Georgia on Personal Data Protection. The Law also defines the obligations of data controllers and data processors, and sets the rights of the data subject. Mentioned guaranties equally cover the persons with disabilities.

The Law of Georgia on Personal Data Protection sets administrative liability for the violations of the rules on data processing. Herewith, in accordance with the amendments made to the Criminal Code of Georgia in 2014, collection, preservation, usage, dissemination of personal data or provision of access to it by other means, which caused significant damage (Article 157), or violation of the secrecy of the private communication or (Articles 158 and 159) are declared as crimes.

An Independent Supervisory Body - Personal Data Protection Inspector is monitoring the implementation of the Law on Personal Data Protection and controlling legality of personal data processing in public (including the law enforcement field) and private sectors. The Inspector is performing his/her duties through his/her Office, which was established on July 1, 2013. In case of the detection of the violation of legislation related to the personal data protection, the Personal Data Protection Inspector is authorized to request to eradicate the fact of violation, to block, to delete or to destroy illegally processed data. Moreover, the Inspector is authorized to impose an administrative liability on the offender, in the form of a warning or a fine. The decision of the Inspector is binding and can be appealed in the court.

## **Article 14\$2**

### **GoG response**

#### *Registration criteria for service providers*

Providers of social service must be registered as providers by the social protection department at the Ministry of Labour, Health and Social Affairs of Georgia according to the Order of the Minister of Labour, Health and Social Affairs of Georgia "On approving the registration rules, procedures and forms for service providers of the state programs". Requirements concern to infrastructure and technical base of the organization, qualification of personnel, experience and so on. The organizations implementing the upbringing activities are required to hold the relevant license. Registering for the social service provision is possible for any organization, which meets the requirements foreseen by the order.

Representatives of the monitoring division at the Ministry of Labour, Health and Social Affairs of Georgia make visits to the applicant organization within 20 working days after applying for registration as social service provider and evaluates its the compliance with the requirements.

#### *Participation of the civil society*



The civil society takes active part in the planning and implementation of services. Their participation through the working groups in the development or reviewing of any relevant action plans or programs, strategies, consideration of their proposals and recommendations is ensured.

Besides, almost all providers of social services are NGOs. NGOs are participating in the establishment and running of social services for children, for family, for elderly, victims of domestic violence and etc. Currently there are 71 NGOs registered as service providers. The persons with disabilities and their representative organizations also are involved in the process of development of policy and programmes and in provision of social services for the target groups.

#### **Article 17 – The right of children and young persons to social, legal and economic protection**

With a view to ensuring the effective exercise of the right of children and young persons to grow up in an environment which encourages the full development of their personality and of their physical and mental capacities, the Parties undertake, either directly or in co-operation with public and private organisations, to take all appropriate and necessary measures designed:

- 1 a to ensure that children and young persons, taking account of the rights and duties of their parents, have the care, the assistance, the education and the training they need, in particular by providing for the establishment or maintenance of institutions and services sufficient and adequate for this purpose;
- b to protect children and young persons against negligence, violence or exploitation;
- c to provide protection and special aid from the state for children and young persons temporarily or definitively deprived of their family's support;

#### **17&1**

##### **GoG response**

The Government of Georgia in order to follow the priorities of the UN convention on the rights of the child and in order to reform the child care system by the Decree N762 from April 24, 2012 approved „the Action Plan for children Welfare 2012-2015'. Diverse state authorities were involved in the implementation plan: the Ministry of Science and Education of Georgia, the LEPL State Services Development Agency of the Ministry of Justice of Georgia, the Ministry of Labour, Health and Social Affairs, the Ministry of Corrections and Legal Assistance, the Ministry of Sport and Youth Affairs and the Ministry of Internal Affairs of Georgia. The state structures closely co-operated with the partner international or local non-governmental organizations.

On April 30, 2014 The National Strategy 2014-2020 for the Protection of Human Rights has been adopted by the Decree №2315-III of the Parliament of Georgia in order to develop a systematic approach to the realization of human rights by all citizens, and the timely rendering of the duties related to these rights by the state authorities. The Strategy is focused on achieving coherence of the legislative/institutional

framework with the development strategy, as well as any requirements stipulated in the Action Plan; conduction of widespread public awareness raising campaigns on human rights and the means by which to realize these rights in practice. In order to improve the conditions concerning the human rights in the country, the Government of Georgia adopted a resolution №445 on approval of the Human Rights National Action Plan (2014-2015) and creation of the coordination council of Human Rights National Action Plan (2014-2015) and approved its statute on July 9, 2014. The special chapter of the action plan is devoted to children's rights, containing concrete actions to be implemented by the responsible bodies in the upcoming years.

Important amendments were made in 2014-2016 to the Law of Georgia on "Elimination of Domestic Violence, Protection and Support to the Victims". The term "neglect" was defined and "domestic violence" constitutes violation of constitutional rights and freedoms of one family member by another through neglect and/or physical, psychological, economic, sexual violence or coercion. Hereby, victim identification group has been defined to determine the status of the victim of domestic violence. Also, issues related to the identification of domestic violence cases against minors (children), rights and protection guarantees of the victims of domestic violence, reporting procedures on the fact of domestic violence and rehabilitation measures for domestic violence offender (abuser) has been defined.

On September 12th of 2016 the Government of Georgia adopted the child protection referral procedures by the decree N 437. Mentioned document aims to protect children from violence in the family and outside it, the child protection (referral) through the creation of a coordinated system. The new document on "Child Protection (referral) procedures," increased a list of the competent authorities involved in cases of child abuse, as well as the social worker's rights and duties. The document determines the violence forms against child, separation mechanism of a child from abuser, according to this mechanism the decision of the care and custody organ's social worker about separation is mandatory to realize to all and administrative sanction are considered in case of failure to comply.

The state promotes development and provision of a wide range of social services, from residential to alternative, community based and family supportive social services. The services include: rehabilitation services for disabled, day care centers, community based services. These services are free for the population whose score reflecting their socio-economic status is below of the defined official level. The services include also: foster care, small group homes for children without parental care, and so on.

Currently, child care services, registered and financed within the State Program of Social Rehabilitation and Child Care include: 44 small group home for children, 73 day care centers (among them 35 centers for children with disabilities). In addition, 1428 children are placed in the foster care in 2015, 525 children were in the reintegration in 2015.

The State social programs budget in 2015 has increased by 9 920 000 GEL in comparison with 2011. Since 2014 financing methodology of child care services has been changed all services for children are provided without co-financing, 100% state funded. Access to social care programs has been significantly increased.

Respective standards for services have been developed and permanent/systematic monitoring of the quality of services is carried out.

Special services (day care centers, mobile multidisciplinary teams and shelters) for children living and/or working on the streets have been developed and financed since 2014.

In order to improve the detection mechanisms of the child abuse and neglect, government expanded the number of institutions involved in the mandatory referral mechanism. Corner stone of the system is the social worker, to whom cases are reported, who is case manager and will respond to each reported case up to separation of a child from abuser parents/family members. The draft law with the amendments was submitted to the Parliament of Georgia for the approval and on June 22 of 2016 these amendments were approved. By the decree of the parliament of Georgia dated on September 12 N 437 “child referral procedures”

The GoG has successfully developed a normative legal platform and mechanisms to fight against domestic violence. LEPL State Fund for Protection and Assistance of (statutory) victims of Human Trafficking implements the project “Reduction of Domestic Violence in Georgia”. The goal of the project is to reduce of domestic violence in Georgia, prevention of domestic violence and reinforce of protection mechanisms. Draft Referral document for the support of the victims and survivors of the domestic violence is developed and will undergo the public consultation on 24<sup>th</sup> of July 2016 with the participation of the Referral subjects and participants of NGO’s working on DV issues.

To meet the needs of children, in 2012-2015 government finances wide range of social services:

State program is adopted by the Government Decree. Goals of the program are: social integration and improvement of conditions of persons with disabilities (including, children), elderly and children deprived of parental care, and children living and/or working on the streets. Budget of the program was 20,000,000 GEL in 2015.

Financing mechanisms of the program are state procurement or voucher. The program is administered by the Legal Entity of Public Law of the Ministry of Labour, Health and Social Affairs of Georgia, with its 12 regional and 62 district branches.

Service providers are registered at the Ministry of Labour, Health and Social Affairs of Georgia according to the Order of the Minister of Labour, Health and Social Affairs of Georgia N 01-61/o 18<sup>th</sup> March of 2016 “On approving the registration rule and form for service providers of the several subprograms of social rehabilitation and child care state program for 2016”.

Providers of social service must be registered as providers by the social protection department at the Ministry of Labour, Health and Social Affairs of Georgia according to the Order of the Minister of Labour, Health and Social Affairs of Georgia “On approving the registration rules, procedures and forms for service providers of the state programs”. Requirements concern to infrastructure and technical base of the organization, qualification of personnel, experience and so on. The organizations implementing the upbringing activities are required to hold the relevant license. Registering for the social service provision is possible for any organization, which meets the requirements foreseen by the order.

Most of the services are financed through the voucher principle. Beneficiaries have choice to select the serving organizations.

The civil society takes active part in the planning and implementation of services. Their participation in to the development or reviewing of any action plan or program, as well as consideration of their proposals and recommendations is secured.

Providers of social services mainly are NGOs. NGOs are participating in the establishment and running of social services for children, for family, for elderly, victims of domestic violence and etc. Currently there are 71 NGOs registered as service providers. The persons with disabilities and their representative organizations are involved in the process of development of policy and programmes and in provision of social services for the target groups.

*Program for the provision of food to children under the risk of abandonment* implies reduction of risk of abandonment. Activities of the program include: Providing children under age of one year with food products, defined by the Georgian Law on "Protecting and supporting natural nutrition of children, terms of use of artificial food".

year	2012	2013	2014	2015
budget	259 200	404 500	781 500	1 772 600

From 2015 the program has been expanded and now within the scope of the program families being in need of emergency assistance are provided with necessary goods (food, clothing, beds, home appliances) not exceeding 1000 GEL.

*Day care centers program* implies support of children of vulnerable families, prevention of their abandonment, support social rehabilitation of children and persons with disabilities. The program provides beneficiaries with the service of a multidisciplinary group, that develops and implements annual individual rehabilitation/habilitation program, ensures psychological service and occupational therapy, promotes inclusive education and provides beneficiaries with transportation and other necessary services. The service is provided in 28 administrative units of Georgia.

year	2012	2013	2014	2015
budget	2 175 066	2 838 200	2 762 400	3 137 900

51 Day care centers are currently registered and provide service for beneficiaries of the program. Among them 35 service providers- for children with disabilities, 14 day care centers for Persons with disabilities, 2 day care centers for children with severe mental and developmental delays.

*Small group home service for children without parental care* implies: Placement of children in a small group homes and creation the environment close to the family. The service include: feeding at least three-times a day, out of which one should be a three-component dinner, provision items of a personal need and clothes appropriate to age, gender and season, Development of individual service plans and permanent control over implementation and reviewing of the service plan, teaching basic skills (self-care, involvement in family

activities etc.), support in developing professional and vocational skills, abilities, preferences and interests of children, support to improve academic performance of a child and planning of free time, etc. The target groups of the program are: Children from 6 to 18 years of age.

year	2012	2013	2014	2015
budget	6 221 220	2 263 300	2 245 700	2 226 700

*Foster care service implies* provision children with the environment as much as possible close to the family (including urgent foster care service), supervised by periodic visits of social workers.

Number of beneficiaries according years: 2012 – 1179, 2013 – 1312, 2014 – 1372, 2015- 1428, 2016- 1298.

year	2013	2014	2015
budget	232 500	438 000	743 500

*Child Rehabilitation program* implies specific rehabilitation of children under age of 18 with cerebral palsy, spinal muscle atrophies and syndromes, muscle dystrophy, congenital myopathy, muscles other primary injures (including non-defined), hemi-, para- and tetraplegia, central nervous system inflammatory and blood vessels disease results, inflammatory poly-neuropathy results, children 3 years and older with peripheral nervous system injury at birth, also children under 3 years with similar conditions. Objectives of the service are: improvement of physical health, increase of their adaptation ability and social integration. The program activities include: a) composition by the interdisciplinary group of specialists the annual plan of individual habilitation/rehabilitation, where the recommended number of courses of habilitation (rehabilitation), their length and provision periods will be pointed out; b) physical therapy, which implies the development of motor skills (concentrated on large motor functions), teaching of the use of adaptation means, development of oral-motor abilities, sitting and standing pose development, walking training and analysis, motion amplitude increase (basically lower limbs), sensor integration, pain management; c) occupational therapy, which implies the development of motor skills (with concentration on delicate motor functions), teaching of usage of adaptation means, sitting and standing pose development, feeding skills development, self-care skills development, enlargement of the amplitude of motion (basically – upper limbs), sensor integration, communication, vision-motor awareness; d) speech and language therapy, which implies communication (including, language) skills development, gesture and sign language (articulation) teaching, feeding skills development, oral-motor skills development, sensor integration, correct breathing skills development; e) doctor’s supervision, which implies neurological testing (check) of a child, medical documentation and record keeping, coordination of the work of the interdisciplinary group; e) in the case of need, psychological assistance of a child, which includes psychological testing, cognitive skills and mental development evaluation and psychological correction; f) in the case of need, psychological assistance to the parent or legal representative of the child; g) rehabilitation activities, which include relevant specialists’ consultation, medical massage, physiotherapy manipulation, physical therapy.

year	2012	2013	2014	2015
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budget	828 888	1 241 000	1 424 530	1 651 000
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*Early intervention program's* goal is mental and physical development of the children with mental and physical development delays (including, Down's syndrome, cerebral palsy and etc.) their early rehabilitation and abandonment prevention. Activities of the program includes: identification, psychological support of parents' and children, development their social, motor, cognitive, self-care and communication skills, support in social integration; According to the individual necessity the service can be provided at home, in medical facility or at kindergarten; Training of parents in order to fulfill the plan (including, development of appropriate skills and special care education).

year	2012	2013	2014	2015
budget	96 150	232 500	438 000	743 500

*Deaf person's communication support program* implies assistance in social integration of deaf persons. The program activities include: Service provision of the sign language interpreters in minimum of 8 regions of Georgia (one interpreter in one region); placing of information about services of sing languages interpreters in general public institutions (local self-government organs, Georgian Courts, Georgian Ministry of Internal Affairs Police Department, public law entities in the sphere of the Ministry of Justice of Georgia – Civil Register Agency and Public Register Agency, also LEPL – Social Service Agency's territorial organs of the Ministry of Labour, Health and Social Affairs of Georgia); Informing of deaf persons about state provision different services by sing languages interpreters.

year	2012	2013	2014	2015
budget	19 200	12 800	28 000	48 000

*Provision of supportive devices* implies provision of a) wheelchairs; b) prosthesis –orthopedic devices; c) hearing devices; d) cochlear implant. Etc. The program could be considered as the additional promotional measure for personal mobility of persons with disabilities, which aims at functional independence and integration into society of persons with disabilities and elderly (women from 60 years old and men from 65 years old).

The components for the above Sub-program are: promotion of the provision of wheelchairs and employment for persons with disabilities, provision of prosthetic orthopedic and hearing appliances, with the cochlear implants, crutches, walking-sticks, walking-sticks for the blind persons and walking frames.

The target group of the component for the provision of wheelchairs and employment for persons with disabilities are the persons with disabilities in need for wheelchairs, including children with disabilities.

year	2012	2013	2014	2015
budget	4 087 742	3 576 700	3 543 870	2 310 800

Protection of children, especially those in streets situations, from abuse, neglect and/or any other type of violence, is one of the main priorities of the Government of Georgia. To address this issue the special working group created under the Inter-agency Council on Combating Trafficking in Human Beings (*hereinafter* – the THB Council) elaborated legal amendments in up to 10 legal acts aiming at creating legal framework to provide children in streets situations with identification documents and strengthening the role of social workers in case of violence by entitling them to separate a minor from a perpetrator or remove a child from his/her family or other environment where the violence was committed. In particular, the elaborated legislative package has two main dimensions:

- It provides the legal definition of children in street situations, who are identified and granted the status of homeless children by the Social Worker. Granting the status of homeless children aims at creating a legal basis to provide those children with identification documents free of charge in order to ensure the access to different state run services, including education, medical, social or other kind of services. The guardianship and custodianship body operating under the Social Service Agency (SSA), is authorized to refer the case to the LELP Public Service Development Agency operating under the Ministry of Justice of Georgia (*hereinafter* – PSDA) entitled for the civil registration for granting the identification documents to homeless children.
- Legal amendments aim at strengthening the role of a social worker. According to the new regulations, the social worker is granted the authorization to assess whether a child is the victim of any type of violence and make a decision to remove the child from family or environment where the violence was committed.

The legal package on homeless children was adopted by the Parliament of Georgia on 22 June 2016 and came into force on 10 August 2016.

Apart from this, based on the legal amendment introduced to the Law of Georgia on Combating Domestic Violence, a new Child Protection Referral Mechanism was developed in order to improve the previous one adopted on 31 May 2010 upon the Joint Order of the Minister of Internal Affairs, Minister of Education and Science and Minister of Health, Labor and Social Affairs.

The revision of the Child Referral Mechanism aimed at expanding the list of responsible entities for referring the child violence cases to the relevant agencies. According to the new referral mechanism, all governmental institutions and their structural units, LEPLs, medical institutions and local municipalities are obliged to refer the possible case of child violence to the SSA and the police. The Child Protection Referral Mechanism was adopted upon the Governmental Decree on 12 September 2016.

## **Article 19 – The right of migrant workers and their families to protection and assistance**

With a view to ensuring the effective exercise of the right of migrant workers and their families to protection and assistance in the territory of any other Party, the Parties undertake:

- 1 to maintain or to satisfy themselves that there are maintained adequate and free services to assist such workers, particularly in obtaining accurate information, and to take all appropriate steps, so far as national laws and regulations permit, against misleading propaganda relating to emigration and immigration;
- 2 to adopt appropriate measures within their own jurisdiction to facilitate the departure, journey and reception of such workers and their families, and to provide, within their own jurisdiction, appropriate services for health, medical attention and good hygienic conditions during the journey;
- 3 to promote co-operation, as appropriate, between social services, public and private, in emigration and immigration countries;
- 4 to secure for such workers lawfully within their territories, insofar as such matters are regulated by law or regulations or are subject to the control of administrative authorities, treatment not less favorable than that of their own nationals in respect of the following matters:
  - a remuneration and other employment and working conditions;
  - b membership of trade unions and enjoyment of the benefits of collective bargaining;
  - c accommodation;
- 6 to facilitate as far as possible the reunion of the family of a foreign worker permitted to establish himself in the territory;
- 11 to promote and facilitate the teaching of the national language of the receiving state or, if there are several, one of these languages, to migrant workers and members of their families;

### **19&1**

#### **GoG**

#### **Migration trends, Legislation and Measures against misleading propaganda relating to emigration and immigration**

In accordance with the rights and freedoms guaranteed by the Constitution of Georgia, as well as the norms and principles recognized by international law. The Law of Georgia on Legal Status of Aliens and Stateless Persons aims at facilitating international cooperation in preventing illegal and clandestine migration, as well as irregular and chaotic migration and insuring the implementation of targeted migration policy and the involvement of state authorities in these processes. The aim of the Law is also to provide legal guarantees for aliens and stateless persons in compliance with internationally recognized human rights and freedoms;



to protect universal human rights for aliens and stateless persons irrespective their race, language, sex, religion, etc.

It should be mentioned, that according to the Law on Fighting against Trafficking actions of the state in the area of avoidance of human trafficking include: reduction of threat of illegal labour migration and human trafficking through providing informative-educational activities, including establishment of hot-lines in relevant state institutions, elaboration of educational programs for the society, provision of information on legal labour and avoidance of human trafficking of Georgian citizens abroad, as well as protection, assistance and rehabilitation centers, etc. for the victims of trafficking to the Georgian institutions on passport-visa services, border check points and consulate departments.

Interagency Council on Combating Trafficking in Human Beings for Carrying out Measures Against Trafficking in Persons coordinates the arrangement of the wide Public Awareness Activities, including trainings, establishment of hot-lines, elaboration of special curriculum, broadcasting of public service announcements and TV and radio programs, preparation and dissemination of the print information material, public discussions on the issue of trafficking in persons, etc. The Committee requested to provide with full and up-to-date information concerning the concrete measures taken to implement the Fighting against Trafficking Act, and any statistics or other data available on the results of such activities:

	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016 (October 31)</b>
<b>Investigation</b>	<b>10</b>	<b>11</b>	<b>13</b>	<b>18</b>	<b>11</b>
<b>Prosecution</b>	<b>1</b>	<b>5</b>	<b>5</b>	<b>5</b>	<b>0</b>
<b>Cases sent to Court</b>	<b>1</b>	<b>4</b>	<b>4</b>	<b>3</b>	<b>0</b>
<b>Conviction</b>	<b>1</b>	<b>2</b>	<b>4</b>	<b>3</b>	<b>2</b>
<b>Convicted persons</b>	<b>1</b>	<b>2</b>	<b>6</b>	<b>3</b>	<b>4</b>
<b>SVOTs<sup>3</sup></b>	<b>2</b>	<b>10</b>	<b>7</b>	<b>8</b>	<b>0</b>

In the course of last decade Georgia had become the country of origin, transit and destination. According to all existing estimates and statistical data Russia continues to host the biggest number of emigrants from Georgia based on foreign born category.<sup>4</sup> However, according to the Federal Migration Service of Russia, by November 10, 2015, there were 43,762 emigrants from Georgia residing in Russia – 26,371 males and

<sup>3</sup> Statutory victims of human trafficking – status of SVOTs is granted by law enforcement agency in accordance with Criminal Procedure Code of Georgia

<sup>4</sup> See also [http://migration.commission.ge/files/migration\\_profile\\_2015\\_30.11.15.pdf](http://migration.commission.ge/files/migration_profile_2015_30.11.15.pdf) ; p.14.

17,391 females.<sup>5</sup> According to different studies the major reasons for emigration remains, economic, education and family reunification. The vast majority of immigrants living in Georgia are from former Soviet countries, and especially Russia and Ukraine. During the reference period, a large proportion of temporary migrants arrived from also Turkey, China, and India, etc.

Georgia is primarily a source, and lesser extent a transit country, for trafficking in human beings. The Georgian victims are trafficked primarily to Turkey, while foreign victims from Central Asia are known to have been trafficked to Georgia.

In 2006, Georgia adopted the Law on the Fight against Trafficking in Persons, developed and established a national victim referral mechanism, and established the Permanent Anti-Trafficking Coordination Council, which adopted the National Action Plans since 2007. Currently the national action plan for 2015-2016 is in place and the Council has developed the draft of the national action plan for upcoming two years.

The Law on Labour Migration was adopted on 22<sup>nd</sup> of April 2015 and it establishes the general framework for exercising the government authority in the field of labour migration. It defines issues, relations and entities in the field of labour migration, bodies exercising government regulation and their attributions. According to the law, there are financial sanctions established for the legal persons/individual entrepreneur who are performing activities related to employment and/or facilitation of employment abroad without being registered to the Ministry of Labour, Health and Social Affairs. The failure to submit to the ministry the information established by the law it is also punished with a fine. The Ministry of Labour, Health and Social Affairs has elaborated bylaws for full implementation of this law, by regulating the following issues: defining the competent authority to review the cases of administrative breaches of the requirements in the field of labour migration; the rules and format of accessing data among public institutions; definition of mechanisms to verify information on foreign employers; the rules of reporting to the Ministry of Labour, Health and Social Affairs on the measures taken in the field of migration; rules on filling out and submitting penalty notice form.

On 7<sup>th</sup> of August 2015 the Government approved Resolution no.417 on approving the rule on employment by a local employer of a labour immigrant (alien not holding a Georgian permanent residence permit) and performance of paid labour activities by such immigrant. The resolution defines conditions for employment by a local employer of a labour immigrant and performance of paid labour activities by such immigrant, guarantees, obligation to provide information about the employment, rights and responsibilities of a labour immigrant and a local employer. According to the resolution, in case of employment of an alien with legal stay, the employer is obliged to inform Social Service Agency within 30 calendar days after the entry into force of the labour contract. The Ministry of Labour, Health and Social Affairs has elaborated the rules and related procedures for defining the form of providing information by the employer about the aliens employed. Both legal acts came into force on 1<sup>st</sup> of November 2015.

The Government of Georgia adopted the Migration Strategy 2016-2020 which is the third strategic document for Georgia defining migration policy. The first document - the Concept of the Migration Policy of Georgia - was developed in 1997 and approved by the President of Georgia; the document summarized the

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<sup>5</sup> See also [http://migration.commission.ge/files/migration\\_profile\\_2015\\_30.11.15.pdf](http://migration.commission.ge/files/migration_profile_2015_30.11.15.pdf); p.14.

vision of the state regarding the regulation of immigration processes, international protection, and internal migration. The concept mainly had a declaratory character and lacked implementation mechanism in the form of an action plan. The Migration Strategy 2013-2015 (approved by the government) and its Action Plan laid down the basis for the institution building in the area of migration management; important steps were made for improving the legislative framework and its approximation to EU Acquis. Currently, there is an increasing drive, in cooperation with the EU member and other states, to increase the basis for legal migration, and prevent illegal migration, and transnational and trans-boundary organized crime. A special emphasis is given to the development of mechanisms facilitating return and reintegration of Georgian citizens, protection of the rights and integration of persons with refugee or humanitarian status, and asylum seekers in Georgia. In order to effectively address contemporary challenges and fulfil international obligations, effective measures are being taken to improve the existing system of fighting illegal migration. A Unified Migration Analytical System is being developed in order to facilitate informed decision-making in migration management and the policy planning process. The Strategy builds on the progress made in the recent years, takes into account the existing challenges, and develops mechanisms for addressing them.<sup>6</sup>

The Migration Strategy Action Plan 2016-2017 was also approved by the State Commission on Migration Issues.<sup>7</sup>

## **Border and Patrol Police related trainings at MoIA Academy**

### **Professional training courses**

In 2016, Special Training Program on Maritime Law for the Coast Guard Department of the Subordinate State Agency Border Police of the Ministry of Internal Affairs of Georgia was developed and Special Professional Educational Program for Border Control Officers as well as Re-training Course for Border Police Officers was updated.

During 2016, active cooperation with international donor organizations and foreign experts has been underway. Within the frames of EU financed programme “More for More” and by the support of IOM Special Professional Training Program for Border Police Officers was evaluated. Mr. Seppo Turkia, expert from Finland was invited to the Academy for that aim during May 31-June 3, 2016. He got acquainted with Integrated Border Management system of Georgia, studied the training programs for border police officers and patrol police, prepared recommendations according to which border and patrol police training curricula have been updated.

Within the frames of the same project British expert Mr. Geoff Amir visited MoIA Academy in 2015. He studied the training module on drugs and prepared recommendations. In accordance with the recommendations, the training curriculum have been updated. Mr. Amir’s another expert mission was organized on October 24-28, 2016. The mission aimed at evaluating and updating the criminal intelligence-training module and enrich it with more practical cases.

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<sup>6</sup> [http://migration.commission.ge/files/migration\\_strategy\\_2016-2020\\_1.pdf](http://migration.commission.ge/files/migration_strategy_2016-2020_1.pdf)

<sup>7</sup> [http://migration.commission.ge/files/action\\_plan\\_2016-2017\\_eng\\_03.05.16.pdf](http://migration.commission.ge/files/action_plan_2016-2017_eng_03.05.16.pdf)

On July 11-15, 2016 within the frames of UNDP GAIMB Project two courses of the Border Police Training curriculum: "Border Interception" and "Efficiency of Border related Activities" were initiated. Both will be incorporated within the training curricula of MoIA Academy.

In August 8-12, 2016 within the frames of the US Embassy Export Control and Border Security (EXBS) program another experts mission was organized to develop border police officers training course that will be launched in the nearest future.

### **International (ad hoc) trainings**

#### **1. Training on escorting, organized by European Agency for the Management of Operational Cooperation at the External Borders of the Member States of the European Union (FRONTEX)**

On May 16-20, 2016 training on escorting, organized by European Agency for the Management of Operational Cooperation at the External Borders of the Member States of the European Union (FRONTEX) was held at MoIA Academy.

Training lasted for 5 days at MoIA Academy in which Patrol Police officers, employees of Migration Department and representatives of MoIA Academy were involved.

At the training, experts of FRONTEX discussed issues connected with human rights, FRONTEX regulations, code of conduct, inspection of airplane safety and etc. On the final day of the training, practical exercise was held at Tbilisi International Airport. (32 participants).

#### **2. Workshop on drugs related issues**

On May 17-19, 2016 within the scopes of the project "Cooperation of Eastern Partnership Countries in the Field of Police" the Academy of the MoIA hosted working meeting regarding the drugs related issues. Lithuanian experts led the workshop. Representatives of MoIA Academy, patrol police, border police and criminal police reviewed the issues related to drugs (5 participants).

Topics on national system for fighting against drugs, drug crime investigation tactics and methods, information gathering, operative measures etc. were discussed during the workshop. Sharing the best Lithuanian experience as well as Georgian system introduction was the aim of the workshop.

#### **3. Drug Interdiction Course**

On June 6-10, 2016 Drug Interdiction Course organized by US Department of State Drug Enforcement Administration (DEA) was held at MoIA Academy. The course was led by US experts.

Topics on national laws and practices, highway interdiction, traps, drug dogs, search methods, trends in trafficking, CS handling, courier characteristics, concealment techniques, control delivery, officer safety etc. were discussed during the training. Apart from theoretical issues the course comprised practical drills as well.

15 representatives from relevant MoIA agencies as well as 5 law-enforcers from Armenia took the course.

**Courses attended outside MoIA Academy and abroad:**

2-5.02 – Refugee Law Seminar organized by UNHCR in Erevan, Armenia (1 representative from MoIA Academy);

30.05-3.06 – Trafficking Course organized by NATO in Ankara, Turkey (1 representative from MoIA Academy);

28-29.06 – Drugs Training organized by Government of France in Tbilisi, Georgia (1 representative from MoIA Academy);

12-16.09 – Border Control Management Training organized by US Embassy in Batumi, Georgia (1 representative from MoIA Academy);

20-22.09 – Regional Training on Enhancing Capacity of Border Control Officers in Border Management organized within the frames of the project Enhancing Capacity of Eastern Partnership Countries in Integrated border Management in Tallinn, Estonia (2 representatives from MoIA Academy);;

29.10-24.11 – Drugs Course in Cairo, Egypt (1 representative from MoIA Academy);

17-21.10 – EU best practice in Integrated Border Management in Spain (1 representative from MoIA Academy);

7-11.11. – Drugs Course in Erevan, Armenia organized by the US Embassy (INL) (1 representative from MoIA Academy);

26.11 - 22.12.2016 – Organized Crime Course in Cairo, Egypt (1 representative from MoIA Academy).

**19\$2**

**GoG response**

Under Georgian legislation and international obligations asylum-seekers, refugees and humanitarian status holders have right to work. In this regard they have the same social rights as the aliens in case of self-employment.

Nowadays Refugees and Humanitarian status holders get 45 GEL monthly allowances (like IDPs) from the Government of Georgia.

The Government of Georgia also fully finances the service of asylum-seekers Reception Centre in Martkopi, consisting of in 2015. From 2016 additional reception center for asylum seekers is functioning near Tbilisi in Martkopi which is designated for 72 asylum-seekers and is functioning in full compliance with international standards.

Georgia ratified the 1951 Convention relating to the Status of Refugees (Geneva Convention) and its 1967 Protocol in 1999.

The Law of Georgia on Refugees and Humanitarian Status was adopted on 6 December 2011 and entered into force at the beginning of 2012. Several bylaws were adopted following the adoption of this law, such as: a bylaw regulating the procedures for granting the status (Decree r. 100 of the MRA), a bylaw on the

accommodation in the reception Centre and a bylaw on determining the rules for annual registration of asylum seekers in Georgia.

Nowadays new draft Law of Georgia on “International Protection” is on the third hearing in the Parliament of Georgia to be adopted in near future. New law enshrines provision of the new type of protection – temporary protection for asylum-seekers in Georgia.

The refugee issues is included in the Migration Strategy of Georgia for 2016-2020 and its Action Plan, which was approved in 2015.

The Migration Strategy of Georgia for 2016-2020 encompasses comprehensive state policies regarding the migration related issues, while its Action Plan further comprehends detailed activities for the successful implementation of state policy on migration.

The Migration Strategy for 2016-2020 defines the following directions of the asylum seekers, refugee and humanitarian status holders, such as:

- Providing healthcare and educational programs for the asylum seekers, refugees and humanitarian status holders and other integration programs and state services for refugees and humanitarian status holders.
- Further development of the intensive program about the language, culture and legislation basics and offering courses.
- Providing Accommodation for asylum-seekers by establishing additional reception center in Martkopi, which is already operational.
- Involvement of the asylum holders in Georgia in the professional preparation programs and the vocational educational programs.
- Holding informational meetings with the asylum seekers, giving exhaustive information about the integration opportunities in Georgia, etc.

The asylum related issues are also enshrined in the National Action Plan of Georgia within the Association Agreement between the European Union and the European Atomic Energy Community and their Member States, of the one part, and Georgia, of the other part.

The Action Plan of the Government of Georgia also enshrines the asylum related issues including enhancement institutional and legal framework of asylum system in Georgia as well as protection of asylum-seekers, refugees and humanitarian status holders.

The Ministry of Internally Displaced Persons from the Occupied Territories, Accommodation and Refugees of Georgia is the main institution responsible for refugee status determination. It has active cooperation with other state agencies, such as State Security Service, Ministry of Internal Affairs, Ministry of Labour and Health Welfare, Ministry of Education, etc. regarding the asylum-related issues.

Moreover, there should also be mentioned the Joint Order (N1033-N2975) of the MRA and MIA dated 23 December 2014, which confirms “The rules of the Ministry of Internal Affairs and the Ministry of Internally Displaced Persons from the Occupied Territories, Accommodation and Refugees regarding the identification of asylum seekers, receiving them on the state border, their transmission and exchange of information of mutual control”. This document defines the protection of the principle of non-refoulement, the rights of the

asylum seekers, refugees and persons with humanitarian status, as well as the border crossing procedures; the imperative areas regarding the identification of the asylum seekers, the procedures of adopting on the state border, transmission and exchange of information.

The issuance of temporary identification cards to the asylum seekers has started on basis of Decree #50 (4.11.2014) of the Minister of Justice on “Approval of the Rule for Issue of Temporary Identification Card” and Decree #52 (15.11.2014) of the Minister of Justice on “Approval of the Form of Temporary Identification Card”.

There is being exchanged the information about the asylum seekers, refugees and persons having humanitarian status in order to guarantee the effective management of the migration processes in the scope of the joint memorandum of 15 January 2015 between the Ministry of the Internally displaced Persons from the Occupied Territories, Accomodation and Refugees of Georgia and the Ministry of Internal Affairs of Georgia.

According to the Resolution #36 of the Government of Georgia issued on 26<sup>th</sup> February 2013, the refugee and humanitarian status holders were involved in the “Common State Program for the Health Care and Insurance” and are considered as the beneficiaries of the “Vertical” program of the health care, according to which they will enjoy the same benefits from the Georgian Healthcare System as Georgian citizens. This system includes 19 medical programs. From 1 January 2015 asylum-seekers are also involved in the “Common State Program for the Health Care and Insurance” and are considered as the beneficiaries of the “Vertical” program of the health care, with refugees and humanitarian status holders.

According to the Georgian Government’s Decree № 15 dated of 29 January 2015, a special educational program was introduced aiming at studying Georgian language for the refugees, humanitarian status holders and asylum seekers. In the light of this document, the target group members will also have an access to general educational programs applied in Georgia.

The availability of the pre-school services for the children of the refugees, humanitarian status holders and asylum seekers was guaranteed by the Resolution № 2-5 of the Tbilisi City Assembly dated of 3 February 2015.

On 23 September 2015 there was held the Joint Agreement N15/02-251 between the Ministry of the IDPs from the Occupied Territories, Accomodation and Refugees of Georgia and the Public Service Development Agency, a legal entity operating under the Governance of the Ministry of Justice of Georgia, on the “Provision of information about the natural persons from the database of the Public Service Development Agency to the Ministry of the IDPs from the Occupied Territories, Accomodation and Refugees of Georgia”.

On 11 January 2016 the Ministry of the IDPs from the Occupied Territories, Accomodation and Refugees of Georgia and the Education Management Information System, legal entity of public law under the Ministry of Education and Science of Georgia, held the MoU on the “Approval of the Rules and Conditions of Financing Vocational Education and Approval of the Maximum Fee Threshold for The State Owned Vocational Institutions”.

The asylum-related issues are covered within the working of State Commission on Migration Issues, which coordinates migration activities of the state agencies of the Government of Georgia.

Georgia has active cooperation with the UNHCR regarding the asylum related issues.

Georgia is an active member in several international panels and processes, such as Prague Process, Eastern Partnership, Mobility Partnership, etc.

Georgia dynamically cooperates with the International Centre for the Migration Policy Development (ICMPD) and with its support has held Cooperation Agreement with Lithuania regarding the exchange of information about the asylum-related issues. In 2015 Georgia held Cooperation Agreement with the Austrian Centre for Country of Origin and Asylum Research and Documentation (ACCORD). Nowadays, active negotiations regarding the forms of cooperation are on-going with other EU MSs such as Hungary, Poland, etc.

As for recent statistics, 5460 asylum-seeker has been entered in Georgia out of which 1406 persons have been granted refugee and humanitarian statuses.

### **19&3**

#### **GoG response**

Project **“Piloting Temporary Labour Migration of Georgian Workers to Poland and Estonia”** which is funded and implemented by IOM has been launched. Ministry of Labour, Health and Social Affairs represents a main partner of the project.

The objective of the project is to develop operational frameworks for facilitating worker mobility from Georgia to Poland and Estonia that promote effective job-matching, migrant skill development and protection of their labour and human rights; the project aims to leverage Poland’s existing labour migration programme for selected countries, including Georgia. Estonia is another project participant EU Member State which displayed interest in piloting a regulated temporary labour migration scheme with Georgia with a particular attention to skilled workers. The objective of the project is to develop operational frameworks for facilitating worker mobility from Georgia to Poland and Estonia that promote effective job-matching, migrant skill development and protection of their labour and human rights.

This objective is being achieved through three specific outcomes: 1) informing the Georgian Government and partners in Estonia and Poland about relevant regulative frameworks and economic needs for labour migration from Georgia, making them aware about existing implementation gaps in light of past experiences and possible ways to improve future labour migration processes; 2) labour migration management structures of Georgia, Poland and Estonia are capacitated to effectively facilitate labour migration from Georgia in a cooperative, comprehensive manner and in adherence to ethical recruitment standards and practices; and 3) temporary and circular labour migration operational model on the basis of ethical recruitment standards is tested, its lessons identified and analysed for improvement of future temporary and circular labour migration support schemes out of Georgia.

The activities include expert assessments, targeted trainings and follow-up meetings/workshops also contributing to increased interactions and setting bilateral cooperation mechanisms between Georgia and two participant EU MS countries, development of due diligence protocols for employers in Poland and Estonia. The pilot schemes on temporary migration with the two selected EU MS will be tested as a tangible accomplishment of the project.



In the frames of the mentioned project training for governmental and non-governmental organizations was held (MoLHSA, LEPL Social Service Agency, Ministry of Foreign Affairs of Georgia, Ministry of Education and Science, Ministry of Sport and Youth).

After the training together with the Social Service Agency educational and informational meetings were held in all regions for the job consultants. More than 80 job consultants participated in the training and they got aware of the project concept, legal base and existing requirements at the labour markets of Estonia and Poland, detailed information about demanded professions, etc.

The Government has already started working and the process will be more active in the future in terms of development of interstate cooperation in the sphere of labour migration in order to conclude bilateral or multilateral agreements for the purpose of protection of labour migrants' rights and their employment at the foreign labour market. Currently negotiations with Israel are in the progress intending to sign an agreement about the circular migration of qualified specialists. Also, working on the agreements with other states such as Austria, Romania, Greece and Qatar is in progress.

#### **19&4**

##### **GoG response**

It should be noted that The Law of Georgia on Legal Status of Aliens and Stateless Persons was amended in 2015. The mentioned law stipulates that migrants in Georgia may carry out work activity in compliance with the rule established by the Georgian legislation. It should be mentioned, that according to the abovementioned Law, migrants in Georgia shall have the same rights, freedoms and obligations as citizens of Georgia. Migrants in Georgia shall be equal before the law irrespective of their origin, social and material status, race, nationality, sex, education, language, religion, political or other beliefs, field of activity, other conditions. Georgia shall guarantee the protection of the life, personal inviolability, rights and freedoms of a foreigner (migrant) on its own territory.

According to the new Labour Code, labour and pre-contractual relations shall prohibit any type of discrimination due to race, skin color, language, ethnicity or social status, nationality, origin, material status or position, place of residence, age, sex, sexual orientation, marital status, handicap, religious, public, political or other affiliation, including affiliation to trade unions, political or other opinions. Foreigners in Georgia shall have the same right to establish civil associations and affiliate with trade unions, scientific, cultural, sports and other civil organizations as citizens of Georgia. Foreigners as citizens of Georgia have the right to participate in collective bargaining and receive benefits from this. As for the accommodation, foreigners have the right to choice of place of residence.

Body which is responsible for dealing with cases of discrimination in relation to membership and activities of trade unions, and for details of any complaints referring to such issues is represented by Labour Inspectorate (detailed information is given above (article 3)). Besides that Labour Inspectorate inspects those companies where foreigners are employed and monitors their working conditions. Labour inspectors inspect not only their working conditions but act in the frames of **Rule of State Supervision/Labour Inspection of Prevention of and Responding on Forced Labour and Labour Exploitation meaning that** authorized to inspect the labor conditions with the aim to identify and respond the violations. It means that the labor inspectors have the ability and power to ensure the proactive supervision mandatorily and not

voluntarily. That will contribute to effective planning and implementation of measures for prevention of forced labor and labor exploitation, as well as the promoting the identification and increasing the efficiency of combating the human trafficking. Following the supervision rule a questionnaire and the annual plan were approved by the Individual Administrative-Legislative Act of the Minister of Labor, Health and Social Affairs, which includes information on the rule of selection, number, sequence and terms of inspections of the establishments. It is worth mentioning that companies selected are having foreign employees and unannounced inspections can be a prevention from forced labour/labour exploitation and human trafficking of migrants.

In this regards and in order for the Labour Inspectorate to cooperate with other governmental bodies, **the “Memorandum of Mutual Cooperation on Promotion of Detection of Cases of Trafficking in Human Beings”** was signed between the Ministry of Labour, Health and Social Affairs of Georgia and Ministry of Internal Affairs of Georgia on August 13, 2015. This will ensure timely sharing of information and reporting of possible cases.

## **19&6**

### **GoG Response**

Article 2 of the Law of Georgia on Legal Status of Aliens and Stateless Persons defines a family member as a "spouse, child, parent of an alien or of a person having the status of stateless person in Georgia, as well as a person under guardianship or custody of an alien or of a person having a status of stateless person in Georgia, and/or a fully dependent minor, and a legally incompetent or disabled person". Such persons may receive a residence permit for family reunification purposes. Law of Georgia on Legal Status of Aliens and Stateless Persons includes separate section on migrants' entry to, stay on, passage in transit through and departure from Georgia. One of the major principles of migrants' entry to, stay on, passage in transit through and departure from Georgia is resections of the principle of family integrity.

A migrant holding a permit of residence have the right to invite to Georgia his/her family members and relatives. According to the new law of Georgia on Legal Status of Aliens and Stateless Persons:

A permanent residence permit is issued to a parent, child, or spouse of a citizen of Georgia, as well as to an alien who has lived in Georgia for the last six years on the basis of a temporary residence permit.

A spouse, child, parent of an alien or of a person having the status of a stateless person in Georgia, as well as a person under guardianship or custody of an alien or of a person having the status of a stateless person in Georgia, and/or a fully dependent minor, or a legally incompetent or disabled person may receive a residence permit for family reunification purposes. A residence permit for such purpose may be issued with the right of temporary stay (in Georgia) for a period of up to six years.

An alien, who is a spouse, parent or child of a citizen of Georgia, may receive a residence permit with the right of permanent residence. In order the firm and regular connection to be maintained with the child's parents and other family members that live in different countries and the necessity of children's protection

is not a reason for their separation, the authority is involved in the case and co-operates with the competent authorities (Ministry of Foreign Affairs, Ministry of Justice, Ministry of Internal Affairs) on the activity of which these relationships depend. As a result of legal procedures, a child has an opportunity to return into biological family and restore strong connection with it.

**The Committee asks whether there are any requirements as to health, means, accommodation, language skills, or time limits prior to eligibility for family reunion, and if so, it requests a full description thereof**

**GoG response:**

There are no additional conditions established for issuing residence permit with the purpose of family reunification.

**The Committee:**

**States may require a certain length of residence of migrant workers before their family can join them. A period of one year is acceptable under the Charter, but a longer period is considered excessive (Conclusion 2011, Statement of interpretation of Article 19§6).**

**GoG response:**

For the purpose of the family reunification alien at any time can invite his/her the family member upon receiving the residence permit.

**The Committee:**

**In its conclusion 2015 committee asks for a complete explanation of the procedure referred to in article 17(10) concerning the decision making process.**

**GoG response:**

Government is attaching the Ordinance of Government of Georgia:

***Government of Georgia Ordinance No 520***

***1 September 2014 Tbilisi***

***On Approving Procedures for Reviewing and Deciding the Granting of Georgian Residence Permits***

***Article 1***

*The Procedures for Reviewing and Deciding the Granting of Georgian Residence Permits attached to this document shall be approved under Article 17(10) and Article 71(1)(c) of the Law of Georgia on the Legal Status of Aliens and Stateless Persons.*

## **Article 2**

*Ordinance No 237 of 5 July 2012 of the Government of Georgia on Determining Additional Conditions for Issuing Permanent Residence Permits to Aliens shall be invalid under Article 25(1)(b) of the Law of Georgia on Normative Acts.*

## **Article 3**

*The Ordinance shall enter into force from 1 September 2014.*

## **Prime Minister Irakli Gharibashvili**

### **Procedures for Reviewing and Deciding the Granting of Georgian Residence Permits**

#### **Article 1 – General provision**

*The Procedures for Reviewing and Deciding the Granting of Georgian Residence Permits (the Procedure) determines the procedures and conditions for granting Georgian residence permits to aliens.*

#### **Article 2 – Definition of terms**

*1. The terms used in these Procedures have the meanings defined in the Law of Georgia on the Legal Status of Aliens and Stateless Persons.*

*2. In addition to the terms defined in paragraph one of this article, the terms used in these Procedures have the following meanings:*

- a) a minor – a person under 18 years of age, except as provided in Article 12(3) of the Civil Code of Georgia;*
- b) a representative – a person’s legal representative or a person acting under a power of attorney in an administrative proceeding;*
- c) the Law – the Law of Georgia on the Legal Status of Aliens and Stateless Persons.*

#### **Article 3 - Submitting an application**

*1. To obtain or extend a Georgian residence permit, an alien shall apply to the Legal Entity under Public Law (LEPL) – the Public Service Development Agency of the Ministry of Justice of Georgia (‘the Agency’).*

*1<sup>1</sup>. To obtain or extend a Georgian residence permit, an application can also be submitted to the Agency outside the Agency’s territorial office buildings (on-site service), for which an alien has to pay a service fee. **(Shall apply to relations arisen from 15 May 2015)***

*2. An application for obtaining or extending a residence permit shall be submitted to the Agency in printed or electronic form by completing the application form available on the Agency website.*

3. A person of full age and capacity staying in Georgia may submit an application for obtaining or extending a Georgian residence permit. An alien staying in another country may apply electronically to the Agency to extend a Georgian residence permit by completing an application form available on the Agency website. An alien may apply to the Agency in person or through a representative.

4. An alien shall apply to the Agency for a Georgian residence permit 40 calendar days before his/her lawful stay in the territory of Georgia expires. This requirement shall not apply to investment residence permits, special residence permits, temporary residence permits and short-term residence permits. **(Shall apply to relations arisen from 15 May 2015)**

5. The question of granting a Georgian residence permit to minors or its extension shall be reviewed based on an application of their representatives. If an application for granting or extending a Georgian residence permit to a minor is submitted by a person acting under a power of attorney, the consent of both parents (if the minor has only one parent – the consent of that parent, or if the minor has no parents – the consent of his/her legal representative) shall be required. If one of the parents (or other legal representative) of a minor applies for granting or extending a Georgian residence permit to the minor, the consent of the other parent (or other legal representative) shall not be required, except where a permanent residence permit is issued to a minor.

6. The consent of the legal representative of a minor or of a legally incompetent person shall be expressed:

a) in a duly certified written form;

b) in a written form expressed in the presence of an authorised person of the Agency;

c) by submitting the consent form available on the Agency website by using an electronic identity or residence card;

d) by expressing consent before an authorised person of the Agency by means of an electronic communication, provided the consenting person can be identified and his/her identity can be verified against the electronic database of the Agency.

7. Representative authority to apply for a Georgian residence permit may be granted to a third person electronically under Article 16(1) and (2) of these Procedures, provided that the third person can be identified and his/her identity can be verified against the electronic database of the Agency.

8. Communication with the interested person shall be made by posting a relevant notice on the Agency website. When submitting an application to the Agency, an interested person may also indicate e-mail as an additional form of communication with the Agency.

9. When reviewing and deciding the issue of granting a Georgian residence permit to an alien, the Agency and other public authorities may communicate with each other in writing and electronically, according to the procedures determined by legislation.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 4 - General requirements for documents to be submitted**

1. The Agency may request a health certificate in addition to the documents required by these Procedures in cases where there is a spread of disease in another country, and where the nature, gravity and duration of the disease may pose a risk to the population of Georgia.

2. An application and documents necessary for obtaining a Georgian residence permit shall be submitted to the Agency in printed or electronic form, in the official language. The Agency may accept an application completed in a non-official language.

3. If copies of documents are submitted, they shall be certified as prescribed by the legislation. Documents made in a foreign language shall be submitted to the Agency together with the Georgian translation certified as prescribed by the legislation. The Agency may accept the passport of an alien without a Georgian translation if it contains the alien's personal details in Latin transliteration.

4. Documents issued in another state that are necessary to obtain a Georgian residence permit, except for documents issued by a foreign diplomatic mission or consular institution accredited in Georgia, shall be submitted after having been duly legalised or apostilled, unless otherwise determined by an international agreement or treaty of Georgia. These documents may be accepted electronically without submitting the original documents if the validity of apostillation or legalisation of the documents can be verified against the appropriate electronic register or by any other means.

5. If it is necessary to confirm a kinship relationship when considering the issue of granting a Georgian residence permit, the kinship can be confirmed by a birth, marriage, paternity, adoption or other document/certificate, as well as by a document evidencing the appointment of a guardian or a custodian. For a person with refugee or humanitarian status a kinship relationship may also be confirmed **with a document issued by the Ministry of Internally Displaced Persons from Occupied Territories, Accommodation and Refugees of Georgia.**

6. When granting Georgian residence permits to Georgia-born aliens under the age of six months, documents confirming the lawful stay in Georgia need not be presented, provided they did not leave the territory of Georgia before applying for a Georgian residence permit. **(Shall apply to relations arisen from 15 May 2015)**

7. The receipt evidencing the payment of the service fee determined under these Procedures for reviewing the granting of a residence permit need not be presented if the payment of the service fee has been made in electronic form and the Agency can verify the payment through electronic means of communication.

Ordinance of the Government of Georgia No 120 of 19 March 2015 – website, 23.3.2015

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 5 - Documents to be submitted for obtaining a work permit**

1. To obtain a work permit for business or employment activity in Georgia, an alien shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a document evidencing employment or business activity (labour contract or other employment document); if legal income of the alien is not confirmed with these documents, money in the alien's personal bank account may also be regarded as income; the amount of that money, taking into account the duration of the residence permit, shall not be less than double the amount of the minimum subsistence level for average consumers in Georgia;

e) a 3X4cm photo;

f) a receipt evidencing payment of the service fee.

2. To obtain a Georgian work permit, freelance workers shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a certificate of professional activity (certificate issued by a professional association or an education certificate (diploma, certificate, etc.);

e) a notice from a bank reflecting the amount available in the personal account; the amount shall not be less than double the amount of the minimum subsistence level for average consumers in Georgia;

f) a recommendation made by a Georgian citizen or by a person having the right of residence in Georgia to issue a work permit to an alien for conducting activity in individual or public interests;

g) a 3X4cm photo;

h) a receipt evidencing payment of the service fee.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 6 - Documents to be submitted for obtaining a study permit**

1. To obtain a study permit, an alien shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a certificate issued by an authorised Georgian educational institution confirming that the alien is studying at that institution (indicating the anticipated duration of study);

e) a document evidencing legal income earned in Georgia by the alien and/or by a Georgian citizen or by his/her relative having the right of residence in Georgia and a document confirming kinship relationship with this person; the money in the alien's personal bank account may also be considered as income; the monthly amount of the money, taking into account the duration of the residence permit, shall not be less than double the amount of the minimum subsistence level for average consumers in Georgia;

f) a 3x4cm photo;

g) a receipt evidencing payment of the service fee.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 7 - Documents to be submitted for obtaining a residence permit for family reunion**

1. To obtain a Georgian residence permit for family reunion, an alien shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a document evidencing kinship;

e) document evidencing legal income earned in Georgia by the alien and/or by a Georgian citizen or by his/her relative having the right of residence in Georgia; the money in the alien's personal bank account may also be considered as income; the monthly amount of the money, taking into account the duration of the residence permit, shall not be less than double the amount of the minimum subsistence level for average consumers in Georgia;

f) a 3x4cm photo;

g) a receipt evidencing payment of the service fee.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 8 - Documents to be submitted for obtaining a residence permit of a former Georgian citizen**

1. To obtain a residence permit of a former Georgian citizen, an alien whose Georgian citizenship has been terminated shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a certificate of termination of Georgian citizenship;



e) a 3x4cm photo;

f) a receipt evidencing payment of the service fee.

2. An alien whose Georgian citizenship has been terminated but who has not left the territory of Georgia need not submit a copy of the document evidencing his/her lawful stay in Georgia in order to obtain a residence permit of a former Georgian citizen. **(Shall apply to relations arisen from 15 May 2015)**

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 9 - Documents to be submitted for obtaining a special residence permit**

1. To obtain a special residence permit, an alien shall submit to the Agency:

a) when a residence permit is issued to the alien on the initiative of a member of the Government of Georgia:

a.a) an application in the established form;

a.b) a copy of the alien's travel document;

a.c) a written application of the member of the Government of Georgia;

a.d) a copy of the document evidencing the alien's lawful stay in Georgia (Georgian visa); **(Shall apply to relations arisen from 15 May 2015)**

a.e) a 3x4cm photo.

b) when issuing a special residence permit to victims of, or persons affected by, the crime of trading in persons (human trafficking) – a petition from the agency providing services to the victims of trading in persons (human trafficking) or from the authority conducting the proceedings;

c) when issuing a special residence permit to the persons specified in Article 60 of the Law:

c.a) an application in the established form;

c.b) a copy of the alien's travel document (if any);

c.c) a 3x4cm photo;

d) when issuing a special residence permit to a foreign citizen having the status of compatriot residing abroad:

d.a) an application in the established form;

d.b) a copy of the alien's travel document;

d.c) a copy of the document evidencing the alien's lawful stay in Georgia;

d.d) a copy of the document evidencing the status of compatriot residing abroad;

d.e) a 3x4cm photo. **(Shall apply to relations arisen from 15 May 2015)**

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

**Article 10 - Documents to be submitted for obtaining a permanent residence permit**

To obtain a permanent residence permit, an alien shall submit the following documents to the Agency:

a) for issuing a permanent residence permit to a Georgian citizen's spouse, parent or child:

a.a) an application in the established form;

a.b) a copy of the alien's travel document;

a.c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

a.d) a document certifying kinship with a Georgian citizen;

a.e) a document evidencing legal income earned in Georgia by the alien and/or by a Georgian citizen or by his/her relative having the right of residence in Georgia; if the Georgian citizen is of retirement age or receives social security benefits – a document evidencing the receipt of a state pension or social security benefits; the money in the alien's personal bank account may also be deemed as income;

a.f) a 3x4cm photo;

a.g) a receipt evidencing payment of the service fee.

b) for obtaining a permanent residence permit for an alien who has lived in Georgia under a temporary Georgian residence permit for the last six years:

b.a) an application in the established form;

b.b) a copy of the alien's travel document;

b.c) a document evidencing that the alien has lived in Georgia under a temporary Georgian residence permit for the last six years (copy of a temporary Georgian residence card/permit);

b.d) a document evidencing legal income earned in Georgia by the alien and/or by a Georgian citizen or by his/her relative having the right of residence in Georgia and a document confirming kinship relationship with this person; if the Georgian citizen is of retirement age or receives social security benefits – document evidencing the receipt of a state pension or social security benefits; the money in the alien's personal bank account may also be deemed as income;

b.e) a 3x4cm photo;

b.f) a receipt evidencing payment of the service fee.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

**Article 11 - Documents to be submitted for obtaining an investment residence permit**

To obtain an investment residence permit, an alien shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a document evidencing at least GEL 300 000 investment in Georgia (audit report);

e) a written recommendation issued by a member of the Government of Georgia or by three citizens of Georgia having the authority to represent a Georgian-based business entity;

f) a 3x4cm photo;

g) a receipt evidencing payment of the service fee.

2. If a family member of the alien who has an investment residence permit wishes to obtain the same kind of permit, the following documents shall be submitted to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of the document evidencing the alien's lawful stay in Georgia; **(Shall apply to relations arisen from 15 May 2015)**

d) a copy of the residence permit of the alien having an investment residence permit;

e) a document evidencing kinship with the alien having an investment residence permit;

f) a 3x4cm photo;

g) a receipt confirming payment of the service fee.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 12 – A residence permit of a stateless person**

If the status of a stateless person in Georgia is established, the person concerned shall automatically be granted a residence permit of a stateless person, which shall be indicated in the decision on the establishment of the status of the stateless person.

#### **Article 12<sup>1</sup> – A temporary residence permit**

A temporary residence permit shall be issued to an alien who has been granted the status of victim under the Law of Georgia on Elimination of Domestic Violence, Protection and Support of Victims of Domestic Violence based on the request of an institution serving victims of domestic violence or a body conducting proceedings. **(Shall apply to relations arisen from 15 May 2015)**

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

## **Article 12<sup>2</sup> – A short-term residence permit**

1. To obtain a short-term residence permit, an alien shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of a document evidencing the alien's lawful stay in Georgia;

d) a document evidencing the right of the alien's ownership of a real thing in the territory of Georgia (except for non-agricultural land), the market value of which exceeds USD 35 000 equivalent in GEL;

e) a document evidencing the market value of a thing under sub-paragraph d) of this paragraph (a market value established by a certified assessor of a body accredited by the Legal Entity under Public Law – the United National Accreditation Agency - Accreditation Center);

f) a 3x4cm photo;

g) a receipt confirming payment of the service fee.

2. To obtain a short-term residence permit, a family member of an alien having a short-term residence permit shall submit to the Agency:

a) an application in the established form;

b) a copy of the alien's travel document;

c) a copy of a document evidencing the alien's lawful stay in Georgia;

d) a copy of the residence permit of the alien having a short-term residence permit;

e) a document confirming kinship relationship with the alien having a short-term residence permit;

f) a 3x4cm photo;

g) a receipt confirming payment of the service fee. **(Shall apply to relations arisen from 15 May 2015)**

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

## **Article 13 - Procedure and time limits for reviewing and deciding the granting of a residence permit**

1. All documents necessary for obtaining a Georgian residence permit shall be submitted with the application. The Agency may additionally request, at any stage of the administrative proceeding, the submission of the documents that support individual facts and circumstances provided by these Procedures (to establish circumstances that are crucial to reviewing and deciding the issue). In addition, during the review of the issue, the alien may submit, on his/her own initiative, additional documents necessary for reviewing the issue.

2. When reviewing the issue, the Agency may invite the applicant and obtain from him/her the documents/information and explanations necessary for reviewing the issue. If the applicant fails to appear without a valid reason, the Agency shall have the right not to review the application.

3. *The time frame for reviewing an application for obtaining or extending a residence permit shall not exceed 30 days after all necessary documents have been submitted to the Agency.*
4. *If the applicant is no longer interested in obtaining or extending a Georgian residence permit, he/she may apply to the Agency at any stage of an administrative proceeding and request termination of the proceeding.*
5. *To identify the grounds for refusing a residence permit, the Agency shall be authorised, and to identify the grounds under Article 18(1)(a),(c),(d) and (e) of the Law shall be obligated, to request and obtain information from public authorities of Georgia within three days after receipt of the application. Public authorities, physical and legal persons shall submit the requested information to the Agency within five days after the request is received. If this time frame is not enough to provide written information, the public authorities and physical and legal persons shall notify the Agency accordingly, after which they shall be given an additional two-day period. If public authorities and physical and legal persons do not submit the necessary information to the Agency within the above time frames, the grounds for denying the Georgian residence permit shall be deemed not to exist (except as provided in Article 18(1)(e) of the Law) and the Agency shall be obligated to complete the review within the period defined by the Law.*
6. *If a special residence permit is issued to an alien on the initiative of a member of the Government of Georgia, the grounds for denying the Georgian residence permit under Article 18 of the Law shall not be verified.*
7. *Based on the information submitted by an alien and information obtained, an authorised official of the Agency shall issue an individual administrative-legal act on granting or refusing a residence permit.*
8. *The Agency shall issue a residence card to an alien who has obtained a residence permit. The form of the residence card shall be approved by the Minister of Justice of Georgia.*
9. *An alien who has been refused a Georgian residence permit may re-apply on the same grounds not earlier than one month after the decision on the refusal of the first application is made.*

#### **Article 14 - Validity of a residence permit**

1. *A temporary Georgian residence permit specified in Article 15(a),(b),(c),(e) and (f) of the Law shall be issued for the period of an alien's anticipated stay in Georgia, but for not more than six years.*
2. *A first temporary Georgian residence permit shall be issued for at least six months and for not more than one year. It may be extended for up to five years, provided the total period of the temporary Georgian residence permit does not exceed six years.*
3. *Where so provided in Article 15(d) of the Law, a temporary Georgian residence permit shall be issued for six years. A short-term residence permit under Article 15(j) of the Law may be issued to an alien for one year. The validity of the residence permit shall be terminated when the right of ownership of a respective real thing is terminated. **(Shall apply to relations arisen from 15 May 2015)***
4. *In special cases, a first temporary Georgian residence permit may be issued for five years.*
5. *A residence permit shall be issued for three years to a person who has been granted the status of stateless person in Georgia. The permit can be extended for the same period and under the same conditions within*

ten days after submission of an appropriate application. When extending a residence permit for a person having a status of stateless person in Georgia, the grounds for refusing to issue a Georgian residence permit under Article 18 of the Law shall not be verified, and the obligation under Article 4(3) of the Procedures shall not apply to persons having a status of stateless person in Georgia. **(Shall apply to relations arisen from 15 May 2015)**

6. The following shall be issued with the right of permanent residence:

a) a permanent residence permit;

b) an investment residence permit;

c) a residence permit issued to a stateless person whose Georgian citizenship has been terminated by renunciation of Georgian citizenship, or who had permanently resided in Georgia before 31 March 1993, was not considered as a Georgian citizen and has not been removed from permanent registration in Georgia after 31 March 1993.

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 15 - Conditions for terminating and extending a Georgian residence permit**

1. A residence permit shall be automatically terminated upon expiry. The Agency may terminate an alien's residence permit if it becomes aware of grounds for termination of the period of stay in Georgia specified in Article 21 of the Law. The information on termination of the alien's residence permit shall be communicated to the relevant public agencies electronically or in writing.

2. Public authorities and legal and/or physical persons shall inform the Agency of grounds for terminating the alien's stay in Georgia.

3. A temporary Georgian residence permit shall be extended under the same conditions as it was issued.

4. Validity of a temporary and a short-term residence permit shall be extended under the same conditions as it was issued. Furthermore, if an alien maintains the right of ownership of a real thing, based on which a short-term residence permit under Article 15(j) of the Law was issued to him/her, he/she shall be released from the obligation to submit a re-estimate of the market value of the real thing. **(Shall apply to relations arisen from 15 May 2015)**

Ordinance of the Government of Georgia No 574 of 10 November 2015 – website, 11.11.2015

#### **Article 16 - Procedure for submitting applications electronically**

1. An electronic application shall be accepted according to the principles and conditions laid down in these Procedures, in consideration of the special characteristics set forth in this article.

2. An electronically submitted application may be accepted if the electronic communication allows for direct visual contact between the applicant and the person authorised to accept the application.

3. *Within 10 days after the registration of an electronic application and attached documents, the documents necessary for reviewing the Georgian residence permit shall also be submitted in printed form.*
4. *If the documents indicated in the third paragraph of this article are not submitted in a printed form, the Agency may decide not to review the application.*
5. *If there is a reasonable suspicion about the applicant's identity, the Agency may refuse to accept an electronically submitted application.*
6. *The Agency shall keep the record of visual contact in electronic form in accordance with the legislation.*

**Article 17 – The procedure for appealing decisions made with respect to Georgian residence permits**

*Decisions made by the Agency with respect to Georgian residence permits may be appealed to a court in accordance with the Law within one month after communicating the decision.*

**Article 18 – Transitional provisions**

1. *The requirement of Article 3(4) of these Procedures shall not apply when extending Georgian residence permits for aliens the validity of whose Georgian residence permits/residence cards is less than 40 days from the day of entry into force of the Law.*
2. *When extending Georgian residence permit on these grounds, aliens who have Georgian residence permits/residence cards at the moment of entry into force of the Law need not have a visa of the corresponding category.*
3. *The review of applications made for a Georgian residence permit on the grounds of kinship and treatment before the entry into force of these Procedures shall be completed according to the procedures applicable on the day of receiving the applications.*

**Committee:**

**With respect to conditions and restrictions on exercising the right to family reunion, the Committee recalls that a state may not deny entry to its territory for the purpose of family reunion to a family member of a migrant worker for health reasons. A refusal on this ground may only be admitted for specific illnesses which are so serious as to endanger public health.**

**GoG response:**

According to the new Law of Georgia on Legal Status of Aliens and Stateless Persons (art. 18):

1. An alien may be denied a residence permit in Georgia if:

f) he/she has such infectious or other diseases, the nature, severity, or duration of which may pose a threat to the population of Georgia. The list of such diseases shall be established by the Ministry of Labour, Health and Social Affairs of Georgia.

**19&11**

## **GoG response**

### **Activities to Ensure Access to Education for Refugee Children**

In order to promote access to education for children without citizenship, refugees and with humanitarian status, in 2015, state amended an act in 'Law of General Education', which fixed that general education funding extends to:

- Georgian citizens;
- persons with neutral ID cards;
- persons with neutral travel documents;
- persons with temporary identity cards;
- foreign citizens (including citizens of foreign states residing abroad with compatriot status);
- persons without citizenship;
- refugee of persons with humanitarian status;

According to the amendment (in 2012) to Minister Order to "Approval of the list of documents necessary for student enrolment in the secondary education institutions", the list of documents necessary for the enrolment of the student on initial/lower secondary/secondary stage of education comprises the document issued by LEPL Public Service Development Agency/local service center, verifying citizenship of Georgia, determination of private number for student with Residence Permit/Residence certificate in Georgia. Exemptions from this submission are asylum seekers, refugees/persons with humanitarian status.

According to the amendment (in 2014) to Minister Order N 98/n to "Approval of the Procedure of Validation of Georgian Educational Documents and Recognition of Foreign Education and Fees", on the basis of the application confirmation certificate for recognition study results in Georgia or abroad, until the final decision of LEPL Education Quality Enhancement Center of Georgia (EQE) person is empowered to apply general education institution, which provides for his/her attendance at appropriate lessons, in order to participate in learning process. The application issued in the general education institution is accompanied with copies of documentation issued in EQE. The enrolment is conducted by education level determined in education recognition/ refuse document. In order the document doesn't specifies the education level of the person, he/she is enrolled according to the age or in case of his/her asset, in lower class for his/her age.

In 2015, the Ministry of Education and Science of Georgia (MoES) has developed Georgian Language Programme for asylum seekers, refugees and Persons with humanitarian status in Georgia. MoES implements the pilot of ***Georgian Language program in secondary education institutions for asylum seekers, refugees and Persons with humanitarian status in Georgia***, which aims teaching of Georgian Language to persons fewer than 18 to make them able to continue their studies in secondary education institutions without barriers.

Taking into consideration the different age group of such persons, their interests, aspirations, thinking skills, psycho-emotional abilities, learning style is dissimilar, The Georgian Language Programme is collaborated in two modules:



**I MODULE** is designed for age group from 6 to 11 and taking into consideration the fact, that the age group doesn't have necessary literacy skills yet, therefore they start to study writing and reading in Georgian. Mindfully psycho-emotional and age development of the target group, I MODULE comprises the only program, which provides learning of Georgian language on A1 level – the lowest level of knowledge the language.

**II MODULE** is designed for the age group from 11 to 18 and implicates the fact, that taking into consideration their skills (especially if they already own native language literacy skills fluently), they are able to respond problems related to reading and writing more quickly. Relatively, the demand on program for this age group is higher. **II MODULE** consists of two programs which provides learning of Georgian language on level of knowledge to overcome A1 and A2 levels.

### ***Promoting Education Accessibility***

General and Vocational Education in Georgia is fully funded and accessible for Migrants by the state, without any barriers.

Higher Education (Bachelor, Master and PHD) is carried out by self-financing, Concerning enrollment - without a united national exams.

### ***Recognition of Qualifications Got Abroad***

Georgian Law stipulates the recognition of Foreign Education. For this purpose, the authentication of the foreign institution's educational documents is implemented and the compliance of educational qualifications described in the document together with learning outcomes is obtained with Georgian qualifications by EQE. Recognition is submitted to: General education; Vocational education; Higher education.

There are following types of Recognition of Education in Georgia:

1. [Recognition of Foreign Education](#)

Recognition of Foreign Education deals with the Recognition of Education within a framework of complete general education received abroad or education received during an academic process in general, vocational and higher educational programmes.

2. [State Recognition of Education for Persons who received education at licensed higher educational Institutions](#)

Recognition of Higher Education by the persons who were registered at licensed higher educational institutions, assumes defining correspondence between the competences achieved at licensed higher educational institutions and learning outcomes within the components of relevant state- recognized educational programmes.

3. [Recognition of Education of Refugees and Internally Displaced People and persons who cannot prove their education or qualification as they had studied at institution, which were liquidated or ceased](#)

## [educational activities](#)

Recognition of Education means to find the evidence that those persons received education they have claimed.

### 4. [Information Regarding of the Status of Foreign Educational Institution](#)

The Center releases the information whether or not the educational institution is recognized under the legislation of the country, where the institution concerned is located (carrying out its Educational) activities.

#### ***Recognition of Informal/Informal Education***

The concept note of recognition of informal/non-formal education had been formed, on the basis of which the project on informal/non-formal education recognition terms and conditions was prepared. Working process on informal/non-formal education manual is filled. The approval of the new Project on informal/non-formal education recognition requires some legislative changes, in this order, the package of the legislative changes is prepared. According to the methodology, the pilot on informal/non-formal education recognition was implemented on three of Programmes: Bee-keeping, Mechanic of rural technics and Specialist of information technologies. The pilot was conducted in three vocational colleges, on the basis of abovementioned methodology, via 4 stages: a) identification; b) documenting; c) evaluation; d) certification.

#### **Vocational Education and Training:**

Migration is one of the major challenges of modern world, therefore it is important that each state including Georgia to address this challenge appropriately. In this light, in 2015 Migration Strategy for 2016-2020 was developed in 2015.

The purpose of the strategy is to protect the right of migrants, refugees and persons with humanitarian status and to ensure their civil integration. Access to VET programs are crucial for integration of migrants, as it will help them to acquire occupational skills that will increase their employability, self-employability and will contribute to their self-fulfillment.

Integration policy rests upon three major issues:

- 1) Improvement of legislative framework;
- 2) Simplified delivery of public services;
- 3) Social integration of migrants.

Georgian government does not spare any effort to make vocational education policy more flexible, consistent and compatible with contemporary global challenges. For instance, in 2015 amendments were added to the rule for vocational education funding. Under this rule, refugees, asylum-seekers or persons with humanitarian status, similarly to Georgian citizens, are eligible to receive the state funding for vocational education (that is they are fully financed by the State). Since 2016, Georgian language learning courses are available at vocational education establishments in Georgia.

Russian, Azerbaijani and Armenian tests and integrated module of Georgian language have been effective since 2016 Spring Intake. As a result, representatives of ethnic minorities living in Georgia are able to take occupational tests in their mother tongue and be enrolled at vocational education program with the full funding from the State. In the frames of the given program, at the first stage, they are undertaking Georgian language module.

In addition to this, in current year, it is planned to establish a new vocational college in Marneuli. One of the key functions of the college will be to provide vocational education to ethnic minorities and offer them relevant vocational programs based on the labor market needs.

#### ***Integration in Higher Education Area***

Georgian legislation envisages enrolment of persons who have acquired relevant education abroad on previous level in higher educational programs without Unified National Examinations/Unified Master Examinations. Georgian Universities offer up to 160 Bachelor, Master and PhD foreign language programs (English-language, Russian-language) to foreign citizens.

Bachelor students are also permitted to take Georgian language preparation program without passing Unified National Examinations. Abovementioned educational program is a 60 credit program; it is possible to take the program only during the first year of studies. After finishing the program, HEI issues a certificate of completion. After finishing Georgian language preparation program students continue their studies on BA educational program in the same HEI as they wish.

***Zurab Zhvania School of Public Administration*** implements official language teaching program for any interested person. Teaching process takes place in 8 regional teaching centers (Akhalkalaki, Ninotsminda, Bolnisi, Marneuli, Dmanisi, Gardabani, Tsalka, village Lambalo of Sagarejo Municipality) of the School and in mobile groups, which means teaching language outside the centers. Official language teaching program is fully financed by the State <http://www.zspa.ge/geo/page/33> . Teaching is carried out on three language levels.

***Teacher Professional Development Center*** implements official language program “Professional Development of non-Georgian School Teachers” in Samtskhe-Javakheti, Kvemo Kartli and Kakheti non-Georgian schools.

#### **Article 27 – The right of workers with family responsibilities to equal opportunities and equal treatment**

With a view to ensuring the exercise of the right to equality of opportunity and treatment for men and women workers with family responsibilities and between such workers and other workers, the Parties undertake:

- 2 to provide a possibility for either parent to obtain, during a period after maternity leave, parental leave to take care of a child, the duration and conditions of which should be determined by national legislation, collective agreements or practice;

**Article 27§2**

**The Committee** notes that it has not been established that fathers have a right to use a part of parental leave on an individual, non-transferrable basis:

**GoG Response**

The Law on the Public Service was amended which enters into force on January 1, 2017. The new law defines parental leave and Article 64 (6) determines that:

Only the parent actually taking care of an adopted child may enjoy the adoption leave provided for by paragraphs 1 and 4 of this article. In that case, an officer shall be granted a leave of 550 calendar days, 90 calendar days of which are paid, provided the child's mother has not used the leave provided for by this article.

As to the Labour Code of Georgia and Decrees of the Minister of Labour, Health and Social Affairs of Georgia, which define and regulate leaves, are being assessed by the Ministry of Labour, Health and Social Affairs of Georgia. The process includes working on the possible amendments to the mentioned laws/bylaws in order to ensure the parental (both parents) leave for the employees employed in private sector.