

International
Labour
Organization



Ministry of Labour and
Social Development
of the Kyrgyz Republic



UNITED
NATIONS
DEVELOPMENT
GROUP

Social Protection Assessment-Based National Dialogue

Towards a Nationally Defined Social
Protection Floor in the Kyrgyz Republic



Social Protection Assessment-Based National Dialogue

Towards a Nationally Defined Social Protection Floor in the Kyrgyz Republic

Social Protection Assessment- Based National Dialogue

Towards a Nationally Defined Social Protection Floor
in the Kyrgyz Republic

A mapping and assessment of existing social security and social protection policies and programmes; identification of coverage gaps and implementation issues; development of priority scenarios to fill the gaps; a rapid costing exercise to estimate the costs for each scenario and policy recommendations to extend social protection to establish a national social protection floor.

Mariko Ouchi (ILO), Artiom Sici (ILO), Valeria Nesterenko (ILO) and Clara Van Panhuys (ILO) produced this report on behalf of the Social Protection Floor (SPF) Working Group in the Kyrgyz Republic.

Copyright © International Labour Organization 2017
First published 2017

Publications of the International Labour Office enjoy copyright under Protocol 2 of the Universal Copyright Convention. Nevertheless, short excerpts from them may be reproduced without authorization, on condition that the source is indicated. For rights of reproduction or translation, application should be made to ILO Publications (Rights and Licensing), International Labour Office, CH-1211 Geneva 22, Switzerland, or by email: rights@ilo.org. The International Labour Office welcomes such applications.

Libraries, institutions and other users registered with reproduction rights organizations may make copies in accordance with the licences issued to them for this purpose. Visit www.ifro.org to find the reproduction rights organization in your country.

Social Protection Assessment-Based National Dialogue. Towards a Nationally Defined Social Protection Floor in the Kyrgyz Republic / ILO Decent Work Technical Support Team and Country Office for Eastern Europe and Central Asia. – Moscow: ILO, 2017

xx; 180 p.

ISBN 978-92-2-131540-7 (print)

ISBN 978-92-2-131541-4 (web pdf)

ILO Cataloguing in Publication Data

The designations employed in ILO publications, which are in conformity with United Nations practice, and the presentation of material therein do not imply the expression of any opinion whatsoever on the part of the International Labour Office concerning the legal status of any country, area or territory or of its authorities, or concerning the delimitation of its frontiers.

The responsibility for opinions expressed in signed articles, studies and other contributions rests solely with their authors, and publication does not constitute an endorsement by the International Labour Office of the opinions expressed in them.

Reference to names of firms and commercial products and processes does not imply their endorsement by the International Labour Office, and any failure to mention a particular firm, commercial product or process is not a sign of disapproval.

ILO publications and electronic products can be obtained through major booksellers or ILO local offices in many countries, or direct from ILO Publications, International Labour Office, CH-1211 Geneva 22, Switzerland. Catalogues or lists of new publications are available free of charge from the above address, or by email: ilo@turpin-distribution.com.

Visit our website: www.ilo.org/publns or contact ilopubs@ilo.org.

Printed in the Kyrgyz Republic.

Contents

- Foreword** **xi**
- Acknowledgement** **xiii**
- Executive summary** **xv**
- Abbreviations** **xix**

- Part 1 Social protection system of the Kyrgyz Republic, recommendations and national priorities**

- Introduction** **3**

- 1 Overview: The socio-economic context and social protection system in the Kyrgyz Republic** **5**
 - 1.1 The national socio-economic context 5
 - 1.2 Social protection expenditure 10
 - 1.3 The social protection system 12
 - 1.3.1. The social insurance system 13
 - 1.3.2. The social assistance system 15
 - 1.3.3. The employers’ liability based assistance scheme 17
 - 1.3.4. The social service 18
 - 1.4 National development frameworks related to social protection 18

- 2 Assessment-based national dialogue in the Kyrgyz Republic: Objectives, methodology and process** **21**
 - 2.1 Objectives 21
 - 2.2 ABND methodology applied to the Kyrgyz Republic 21
 - 2.2.1 Development of the assessment matrix 22
 - 2.2.2 Costing projections of selected SPFs 23
 - 2.3 ABND in the Kyrgyz Republic: process and the recommendations 24
 - 2.3.1 ABND process followed in the Kyrgyz Republic 24
 - 2.3.2 The recommendations adopted by the SPF working group during the second ABND 28

3	Policy assessments of the four essential SPF guarantees	31
3.1	Health care	31
3.1.1	Present health care system	31
3.1.2	Analysis of the Kyrgyz health care system	33
3.1.3	Policy gaps and obstacles for implementing health insurance schemes	39
3.1.4	Conclusions and recommendations	40
3.2	Children	43
3.2.1	Present social protection system related to children	43
3.2.2	Analysis of current social protection coverage for children	44
3.2.3	Policy gaps and obstacles for implementing social protection schemes for children	51
3.2.4	Conclusions and recommendations	52
3.3	Working-age women and men	54
3.3.1	Present social protection system related to working age women and men	54
3.3.2	Analysis of current social protection coverage for working-age women and men	55
	A. Coverage: scope and extent	55
	B. Adequacy of cash benefits for working age women and men	60
	C. Financial sustainability and affordability of social protection system: taxpayers, contributors and fiscal space	64
3.3.3	Policy gaps and obstacles for implementing social protection schemes for working age women and men	66
3.3.4	Conclusions and recommendations	67
3.4	Old-age women and men	70
3.4.1	Present social protection system related to old-age women and men	70
3.4.2	Analysis of current social protection coverage for old-age women and men	71
	A. Coverage: scope and extent	71
	B. Adequacy of cash benefits and social services	72
	C. Financial sustainability and affordability of social protection system: taxpayers, contributors and fiscal space	75
3.4.3	Policy gaps and obstacles for implementing social protection schemes for old-age women and men	78
3.4.4	Conclusions and recommendations	79
4	General conclusions and recommendations	83
	Annex	95

Part 2 Scenarios for the implementation of the national priority: maternity protection benefit

Introduction	123
1 Converting recommendations into scenarios suitable for costing	125
2 Methodology for the financial feasibility and costing tool – RAP model	127
2.1 Costing.....	127
2.2 Steps to calculate SPF in the Kyrgyz Republic.....	128
2.2.1 Step 1: Input data in the RAP model.....	129
2.2.2 Step 2: Calculate the cost of various scenarios	130
2.2.3 Step 3: Present the final results (cost of several SPF benefits depending on the national priorities).....	132
2.2.4 Step 4: Prioritize the scenarios, analyse affordability of the proposed recommendations and scenarios.....	133
3 Financial calculations of increasing the maternity benefit as selected priority by working group members (for each: scenario, assumptions, result and sources of data)	135
3.1 Current situation and developments	135
3.2 Policy gaps and recommendations	137
3.3 Scenarios for maternity protection	138
3.3.1 Scenario 1 – aiming for universal coverage	139
3.3.2 Scenario 2 – Aiming for coverage of total employment (incl. self-employed and employed in formal and informal sector).....	145
3.3.3 Scenario 3 – aiming for providing the benefit to women in paid employment (excl. self-employed) – C183	152
4 Definition and cost of a Social Protection Floor for maternity benefit in the Kyrgyz Republic	155
Annex	159
Bibliography	177

Boxes

1	Policy gaps and obstacles for implementing social protection system in the Kyrgyz Republic: Cross-cutting problems	27
2	Social protection priorities selected at the ABND.....	29
3	Recommendations on health sector developed within ABND	42
4	Recommendations on improving the social protection of children developed within ABND.....	53
5	Recommendations on improving the social protection of working-age persons developed within ABND	69
6	Structure and funding of the pension.....	73
7	Recommendations on improving the social protection of older people developed within ABND	81

Figures

1	Poverty incidence: Regional comparison in Europe and Central Asia, most recent year.....	6
2	Decrease in the poverty levels by region in the Kyrgyz Republic, 2005–2014	8
3	Income structure of population, 2010 – 2014	9
4	Total public social protection expenditure (including health): Regional comparisons, 2005–2011 (per cent of GDP).....	10
5	Public expenditure on social protection for older people and children, as per cent of GDP, 2009–2012	11
6	Structure of the social protection system in the Kyrgyz Republic	13
7	Structure of social insurance system in the Kyrgyz Republic	14
8	Structure of the social assistance system in the Kyrgyz Republic	16
9	Structure of the employers' liability based assistance system in case of temporary incapacity in the Kyrgyz Republic.....	17
10	Structure of the social service component in the Kyrgyz Republic	18
11	Structure of the assessment matrix	22
12	Structure of Rapid Assessment Protocol	23
13	Steps of the assessment-based national dialogue in Kyrgyz Republic	26
14	Comprehensive health care system of the Kyrgyz Republic	32
15	Multiple dimensions of health coverage in the Kyrgyz Republic compared to other regions (2011).....	34
16	Structure of insured persons with health care in the Kyrgyz Republic, 2015, per cent of the total number of insured.....	35
17	Government expenditure on health care: Comparison of the Kyrgyz Republic to countries in Eastern Europe and Central Asia, 2014	37
18	Out of pocket payment as percentage of the total expenditure, 2014.....	38
19	Comparison of cash benefits for children to children's subsistence minimums, 2015	46

20	Maternal mortality ratio in the region and world (per 100,000 live births)	49
21	Percentage of children between first and 11th grade combining schooling and child labour, by age groups	50
22	Structure of economically active and inactive population in 2014, in thousand persons	56
23	Employed population in the informal sector, in per cent and thousand persons, 2012 (by economic sector)	57
24	Coverage of registered unemployed persons.....	58
25	Employment injury protection: replacement rates for temporary disability, in per cent	61
26	Comparison of cash benefits for working age women and men and other social indicators, 2015	62
27	Comparison of length of maternity leave: International (C183) and National standards (Kyrgyz legislation)	63
28	Regional comparison of public expenditure on social protection for persons of active age, in percentage of GDP, 2009–2012	64
29	Comparison of cash benefits for older persons and other social indicators, 2015	75
30	Regional comparison of ratio: number of people age 65+ per 100 people age 15–64	77
31	Worldwide comparison of pension spending as per cent of GDP, late 2000s	78
32	Structure of Rapid Assessment Protocol Model	127
33	Steps to identify affordable SPFs for the Kyrgyz Republic	128
34	Monthly subsistence minimum per capita from 2010 to 2018, KGS	131
35	Cost of different options to extend maternity protection coverage to self-employed, employed in informal sector and those unemployed and outside of the labour force, 2020	156

Tables

1	Trends in poverty rates in the Kyrgyz Republic, 2005, 2008, 2014 and 2015	8
2	Public social protection expenditure in the Kyrgyz Republic: By SPF guarantees, latest available year (per cent of total government expenditure).....	12
3	Number contributors to social insurance scheme and labour force.....	15
4	Share of the population who does not have access to health care, % of the total population	36
5	Government expenditure on health care.....	37
6	Medical personnel per 10,000 persons in the Kyrgyz Republic.....	39
7	Number of beneficiaries (thousands) of cash benefits for children in the Kyrgyz Republic, 2012–2014.....	45

- 8** General trends of infant mortality rate and child mortality rate in the Kyrgyz Republic..... 47
- 9** Share of underweight children from ages 1 to 6 in the Kyrgyz Republic 48
- 10** Social indicators of coverage in the Kyrgyz Republic, in 2015 71
- 11** General calculation methodology 132
- 12** Families by number of children and average family size 135
- 13** Number of pre-school institutions – balancing work and family life..... 136
- 14** Maternity protection in the Kyrgyz Republic 137
- 15** Options of level of maternity benefit coverage in the Kyrgyz Republic 155

Foreword

The social protection floors are a basic set of social security guarantees that should be extended to the entire population. The Government of the Kyrgyz Republic has taken the decision to expand social security coverage and establish a minimum level of social protection for all its citizens. This was done in line with the Social Protection Floors Recommendation, 2012 (No.202), which was adopted by the International Labour Conference at its 101st session in 2012 and in accordance with the National Social Protection Development Programme for 2015–2017, which was also confirmed by the Government Programme of the Kyrgyz Republic “Jany Doorgo – Kyrk Kadam” for 2018–2023.

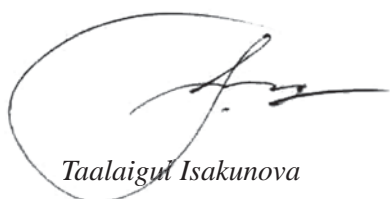
A social protection floor aims to provide a universal minimum level of social benefits and services by identifying the following essential guarantees in the life cycle, such as access to essential health-care services, basic income security for children, those who are of working age and older people.

The right to social security is anchored in the Constitution of the Kyrgyz Republic, Law "On the state social pension insurance" and Law "On the state benefits". The commitments of the Kyrgyz Republic to improve social protection are reflected in article 9.1 of the Constitution, the National Social Protection Development Programme for 2015–2017 and the Government Programme of the Kyrgyz Republic “Jany Doorgo – Kyrk Kadam” for 2018–2023.

Between 2015 and 2017, the International Labour Organization, in collaboration with the Ministry of Labour and Social Development and the United Nations agencies in the Kyrgyz Republic, conducted an assessment of the social protection system in the country, which is called the Assessment-Based National Dialogue on social protection. The main purposes of conducting the Assessment-Based National Dialogue is to analyse the present system compliance with the social protection floors and to formulate a set of policy recommendations by identifying the priorities of actions with mid/long-term perspective to improve the national social protection floor in the Kyrgyz Republic.

The assessment process was based on a number of technical consultations with government organizations and institutions, workers’ and employers’ representatives at a national level, and the United Nations agencies located in the Kyrgyz Republic. Social protection systems including both contributory and non-contributory schemes to cover both formal and informal sectors indeed exist in the country. Yet, various policy gaps and obstacles for implementing national social protection schemes were identified in the process of participatory national dialogues.

The participatory approach applied throughout the Assessment-Based National Dialogue exercise has contributed to familiarize the social protection floor concepts among public institutions, worker and employer representatives, civil society organizations and general public of the Kyrgyz Republic. We hope that the results of the Assessment-Based National Dialogue and, in particular, policy recommendations presented in this report will provide useful guidance towards the development of a national plan on strengthening social protection system in the Kyrgyz Republic.



Taalaigul Isakunova
Minister of Labour and
Social Development
of the Kyrgyz Republic



Olga Koulaeva
Director,
ILO DWT and Country
Office for Eastern Europe
and Central Asia



Yukie Mokuo
UN Resident
Coordinator a.i.
in the Kyrgyz Republic

Acknowledgement

The authors would like to acknowledge the assistance of all the persons involved in the process of the assessment-based national dialogue in the Kyrgyz Republic. In particular, representatives of the Ministry of Labour and Social Development (MLSD), Ministry of Health (MoH), Ministry of Economy (MoE), Ministry of Finance (MoF), Ministry of Education and Science (MES), Social Fund (SF), Compulsory Health Insurance Fund (CHIF), National Statistical Committee (NSC), Federation of Trade Unions of Kyrgyzstan (FTU), National Confederation of Employers of the Kyrgyz Republic (NCE), civil society organizations and colleagues from the UN agencies involved in the social protection floor initiative.

The authors would like to express gratitude to the MLSD for their leaderships and assistance throughout the ABND process. It is worth mentioning that the official commitments presented by the MLSD in the early stage of the ABND implementation, such as the inclusion of the SPF and ABND in the National Social Protection Development Programme for 2015–2017 as well as the establishment of SPF Working Group under the MLSD leadership, were the essential and critical factors for the successful implementation of the ABND. The valuable comments provided by the MLSD, line ministries and institutions, social partners, civil society organization and the UN agencies are highly appreciated.

The authors also express their appreciation to Kudairbegen Bazarbaev, former Minister of the MLSD, and acting Minister Taalaigul Isakunova, Alexander Avanesov, the former UN Resident Coordinator in the Kyrgyz Republic, Dimitrina Dimitrova, former Director for the ILO Decent Work Team and Country Office for Eastern Europe and Central Asia and acting Director Olga Koulaeva for providing constant support throughout the ABND process. Also, the authors are thankful to the Ministry of External Affairs of Finland for financing the ABND in the Kyrgyz Republic through the ILO Technical Cooperation project “From the Crisis towards Decent and Safe Jobs in Kyrgyzstan and Tajikistan, Phase II”, and to the Rolf Buchel (ILO Chief Technical Advisor) for his constant support.

The authors would also like to acknowledge and thank the individuals that took part of the review process of the report and their active participation, co-facilitation and technical inputs in the ABND exercise: G. Abdullaeva (NSC), N. Asylbekova (UN Women), A. Chandybaeva (the State Agency on self – government affairs and interethnic relations), B. Djailova (Health aid department), E. Dunganava (NCE), C. Esengul (WFP), G. Jumataeva, (SF), Ch. Kalmyrzaeva (President office), S. Kasymbaeva (MLSD), K. Kubatova (MLSD), E. Kuikiev (MLSD), J. Kuljanova (SF), A. Kurbanova (ILO), K. Lloret (ILO), K. Maatkaziev (State Inspection on Ecological and Technical Security), M. Mambetalieva (MoF), V. Matveeva (CHIF), R. Musuraliev (Ministry of Internal

Affairs), G. Okoeva (MLSD), J. Omurova (MoE), B. Orokov (ILO), J. Ryspekova (MLSD), B. Satybekov (independent consultant), S. Semenova (FTU), Sh. Sokhibnazar (WFP), J. Sopukeeva (FAO consultant), K. Stavrakis (ILO), E. Suyumbaeva (ILO), G. Turusbekova (UNICEF). Without their support, this ABND report would not have become a reality.

Finally, the authors wish to acknowledge the valuable contributions of the reviewers regarding the improvement of quality, coherence, and content presentation of chapters Naomi Cassirer and Gabriela Christen-Munoz.

Executive summary

The system of social protection established in the Kyrgyz Republic in the early 1990's inherited the soviet system and needed to be reformed in the context of new environment. During the last decades, the social protection system has been partially improved and adapted because of the new socio-economic reality of the country. Despite implemented measures, the social protection system continues to remain as one of the lowest developed in the CIS region. Therefore, the Kyrgyz Republic strives to make further improvements as to extend social protection coverage to the entire population and improve the social security system.

An important milestone is the progressive implementation of the Social Protection Development Programme for 2015–2017 (adopted by Government Decree No.85, February 27, 2015). The Programme focuses on improving targeted social assistance for vulnerable groups, increasing economic activity of the working population and reducing poverty among the population living in difficulty situations. Meanwhile, the main priorities of the Programme are social protection of children and families, disabled persons and the elderly. Which may be improved in accordance with Social Security (Minimum Standards) Convention, 1952 (No.102) and Social Protection Floors Recommendation, 2012 (No.202), stipulated in the Programme. Thus, the Government demonstrates strong commitment to extend social protection coverage to the whole population in the categories of children, invalidity and old age.

In 2012, in a landmark event, the ILO's 185 member States, including the Kyrgyz Republic, adopted a new international strategy, the Social Protection Floors Recommendation, No.202 agreeing that there was a socio-economic necessity for social protection and that urgent action was required to fill existing social protection gaps.

According to Recommendation No.202 (Paragraphs 4 and 5), social protection floors are nationally defined sets of basic social security guarantees which should ensure at least, over a person's life cycle, that all in need have access to essential health care and to basic income security, which together secure effective access to goods and services defined as necessary at the national level. These national social protection floors should at least comprise the following basic social security guarantees:

- a. access to a nationally defined set of goods and services constituting essential health care, including maternity care, that should be available, accessible, acceptable, and of quality for all;
- b. basic income security for all children, at a nationally defined minimum level, providing access to nutrition, education, care, and any other necessary goods and services;

- c. basic income security, at least at a nationally defined minimum level, for persons in active age who are unable to earn sufficient income. Particularly in cases of sickness, unemployment, maternity, and disability; and
- d. basic income security, at least at a nationally defined minimum level, for older persons.

Assessment process

In recognition of the need to take stock of existing social protection realities in order to understand what elements of national SPFs are in place and where “gaps” in the SPFs exist, the ILO collaborated with governments, social partners, civil society, academicians, and UN agencies in the Kyrgyz Republic to conduct social protection assessment-based national dialogue exercises. Therefore, in December 2014 the ABND process was initiated in the Kyrgyz Republic. A roundtable "Assessment of SPFs of the Kyrgyz Republic based on National Dialogue" was organised by the government and the UN country team to discuss the ABND and its relevance, and come up with a schedule for the organisation of the ABND in the Kyrgyz Republic.

The ABND in the Kyrgyz Republic follows three steps: (1) preparation of an ABND matrix, (2) converting recommendations into optimal policy options and costing, (3) finalisation of the findings and submission of report to the government.

1. The first ABND in the Kyrgyz Republic was organized to discuss the National Social Protection system on 17–19 June, 2015 in Koi-Tash and Bishkek upon the initiative of the Ministry of Labour and Social Development. At the first ABND, the draft ABND assessment matrix prepared by the ILO was discussed by the members of technical working group.

The main findings based on the assessment matrix with policy gaps, obstacles for implementing social protection schemes and recommendations for SPF in the Kyrgyz Republic were shared at the high-level roundtable organized at the end of the first ABND. The matrix covered four SPF guarantees, including access to health care; social protection for children, working-age population and elderly persons.

2. The ABND SPF Working Group has been called upon to participate in the discussion to examine the present social protection system in the Kyrgyz Republic. The main purposes of the second ABND are to formulate the recommendations by selecting the priorities of national actions in the field of social protection and promote the implementation of the relevant decisions adopted by the Working Group at its second Assessment-Based National Dialogue.
3. The third ABND was organized in 2017 to submit the report on “Social Protection Floors: Assessment-Based National Dialogue in the Kyrgyz Republic” which includes national priorities selected by the Working Group members and approved at high-level round table on 19 February, 2016 and costing for its implementation.

The ABND exercise assesses how the SPF is placed and further extended in the country. Policy gaps and obstacles for implementing social protection schemes are identified and a set of recommendations is developed for further design and implementation of social protection provisions that would guarantee an SPF for all residents.

Main outputs of assessment

Within the assessment process, policy gaps and obstacles for implementing the social protection system were identified. These could be considered common trends for the whole world and especially for some CIS countries. However, in the social protection system of the Kyrgyz Republic the following general and specific policy gaps and obstacles for implementing social protection floors were identified: low level of social payments, low quality of social services (including health care) and its limited access in mountainous regions, no social security coverage of informal workers, social security evasion in the formal sector, limited linkage between social protection and social insurance schemes and lack of qualified social workers in rural regions.

As a result of the technical discussions within the assessment process, the government, social partners and international organization groups selected the following recommendations as the potential national actions in the field of social protection:

Health

- Improving quality of healthcare services;
- Increase staffing in the regions (in remote areas);
- Extending the coverage of informal workers by compulsory health insurance;
- Ensuring the access of vulnerable groups to health services.

Children

- Increasing the level of monthly benefit to low income families with children;
- Indexing survivor pension;
- Extending the access of social services of alternative boarding;
- Improving the social service system.

Working age

- Developing the mechanism for formalising labour relations;
- Increasing maternity benefits;
- Extending maternity coverage to informal workers;
- Increasing the unemployment benefit level.

Elderly

- Increasing the pension level;
- Developing alternative services (rehabilitation and day care centres, hospices) at the local level;
- Increasing the monthly social old-age benefit;
- Improving the social service system.

The following recommendations on social protection were agreed upon as the priorities for further actions by all high-level working group members.

The main priorities: Increasing the pension level and increasing the monthly benefit to low income families with children

Additional priorities: Improving the social service system and increasing the level of maternity benefit

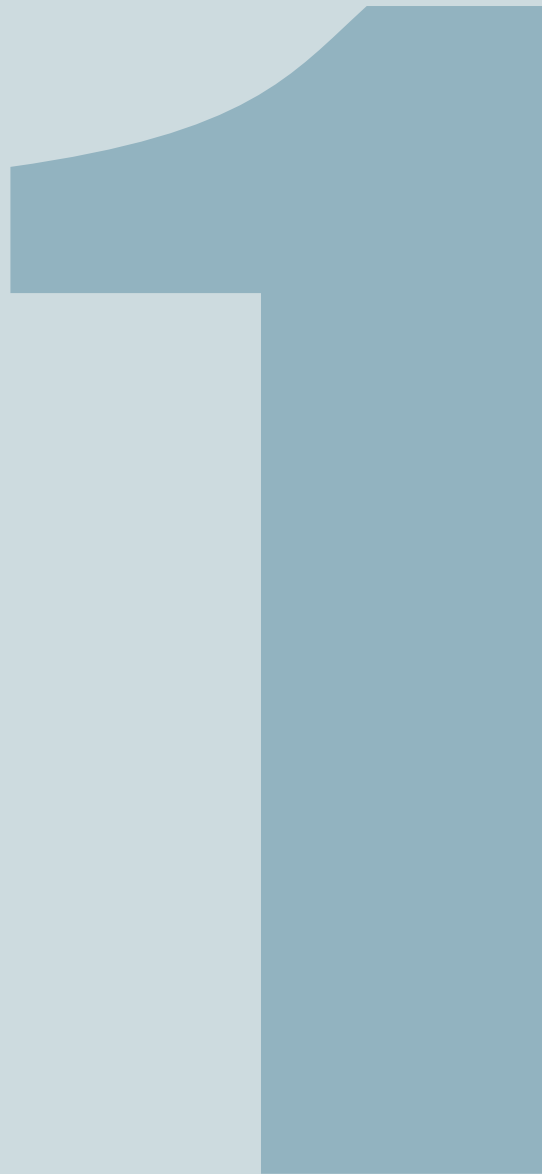
Within consultations with the Ministry of Labour and Social Development held in 2016, it was agreed to carry out calculations of scenarios for an additional national priority “increasing the level of maternity benefit”. In the framework of the technical meeting held in 2017, the participants of the working group selected three most acceptable and priority scenarios for increasing the coverage of maternity benefits:

- by 2022 (a) to improve the coverage of formal workers, farmers and self-employed and (b) to increase the benefit level based on inflation or up to 3,000 KGZ;
- by 2030 (a) to extend the coverage to informal workers and (b) to increase the benefit level up to subsistence minimum;
- by 2040 (a) to cover all women and (b) to increase the benefit level up to 2/3 of average or previous wage.

Abbreviations

ABND	Assessment-Based National Dialogue
ADB	Asian Development Bank
AIDS	Acquired Immunodeficiency Syndrome
AMS	Average Monthly Salary
BPHIS	Basic Public Health Insurance Scheme
CEDAW	Convention on the Elimination of Discrimination Against Women
CHI	Compulsory Health Insurance
CHIF	Compulsory Health Insurance Fund
CIS	Commonwealth of Independent States
CRC	Convention on the Rights of the Child
CSO	Civil Society Organizations
CSM	Child's Subsistence Minimum
EEU	Eurasian Economic Union
EEC	Eurasian Economic Commission
FAO	Food and Agriculture Organization
FTU	Federation of Trade Unions
G20	Group of twenty
GDP	Gross Domestic Product
GHA	Guaranteed Health Assistance
GMI	Guaranteed Minimum Income
HIV	Human Immunodeficiency Virus
HLCP	High-Level Committee on Programmes
ILC	International Labour Conference
ILO	International Labour Organization
IMF	International Monetary Fund
KGS	Kyrgyzstani Som
KIHS	Kyrgyz Integrated Household Survey
KR	Kyrgyz Republic
KSPDP	Kyrgyz Social Protection Development Programme for 2015-2017
MBLIF	Monthly Benefit to Low Income Families with Children
MDG	Millennium Development Goal
MoE	Ministry of Education
MoF	Ministry of Finance
MoH	Ministry of Health
MICS	Multiple Indicator Cluster Survey
MLSD	Ministry of Labour and Social Development
MSB	Monthly Social Benefit
NCE	National Confederation of Employers

NDC	Notional Defined Contribution
NGO	Non-governmental Organization
NSC	National Statistical Committee
OOP	Out-of-Pocket
OSH	Occupational Safety and Health
PAYG	Pay-As-You-Go
RAP	Rapid Assessment Protocol
RPSM	Retired People Subsistence Minimum
SDG	Sustainable Development Goals
SF	Social Fund
SPF	Social Protection Floor
SPF-I	Social Protection Floor Initiative
SPF-WG	Social Protection Floor working group
SPIAC-B	Social Protection Inter-Agency Cooperation Board
SSPI	State Social Pension Insurance
TDB	Temporary Disability Benefit
TI	Transparency International
UDHR	Universal Declaration of Human Rights
UHC	Universal Health Coverage
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCEB	United Nations System Chief Executive Board for Coordination
UNDAF	United Nations Development Assistance Framework
UNDESA	United Nations Department of Economic and Social Affairs
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund UNICEF United Nations Children’s Fund
US\$	United States dollar
VHI	Voluntary Health Insurance
WB	World Bank
WDI	World Development Indicators
WFP	World Food Programme
WG	Working Group
WHO	World Health Organization
WSPR	World Social Protection Report



**Social protection system
of the Kyrgyz Republic,
recommendations and national
priorities**

Introduction

With the onset of the 2008 global financial and economic crisis, people around the world faced declining incomes, fewer employment and livelihood opportunities and reduced access to social services, benefits, remittances and credits. In response, the High-Level Committee on Programmes (HLCP) of the United Nations System Chief Executive Board for Coordination (UNCEB) committed to decisive and urgent multilateral actions and agreed on nine joint initiatives in April 2009. The sixth initiative was the Social Protection Floor Initiative (SPF-I), which calls for the provision of social transfers and access to essential services for all individuals.

Intensive discussions over the course of three sessions of the International Labour Conference (ILC) in 2001, 2011 and 2012 confirmed the necessity of building social protection floors (SPFs) and comprehensive social security systems. With endorsement from the G20, the United Nations, the governments, the workers' and employers' organizations of the ILO's member States adopted the Social Protection Floors Recommendation, 2012 (No.202) at the ILC in June 2012.

The Social Protection Floors Recommendation, 2012 (No.202) provides guidance to member States in building comprehensive social security systems and extending social security coverage by prioritizing the establishment of national SPFs accessible to all in need. Recommendation No.202 aims at ensuring that all members of society enjoy at least a basic level of social security throughout their lives.

The national SPFs shall consist of the following four social security guarantees throughout the life cycle, as defined at the national level:

- access to essential health care, including maternity care;
- basic income security for children, providing access to nutrition, education, care and any other necessary goods and services;
- basic income security for persons in active age who are unable to earn sufficient income, particularly in cases of sickness, unemployment, maternity and disability;
- basic income security for older persons.

Recognizing the need to take stock of existing social protection realities in order to understand what elements of national SPFs are in place and where “gaps” in the SPFs exist, the ILO collaborated with governments, social partners, civil society, academicians, and UN agencies in the Kyrgyz Republic to conduct social protection assessment-based national dialogue (ABND) exercises.

The ABND as an implementation tool for improving national SPFs was included in the Kyrgyz Social Protection Development Programme for 2015–2017, which was adopted by the Decree of the Government of the Kyrgyz Republic, No.85 (February 27, 2015). The Kyrgyz Republic is the first country in the CIS region to organize the ABND exercise on SPFs.

It is very encouraging and indeed very timely to conduct ABND on national SPFs, focusing on how best to ensure an effective national social protection system for the Kyrgyz Republic. Especially as the Kyrgyz Republic is in the implementation stage of its National Strategy for Sustainable Development 2013–2017 and is already planning its national strategy for the following 15 years as part of the global dialogue on the new post-2015 sustainable development agenda.

1 Overview: The socio-economic context and social protection system in the Kyrgyz Republic

1.1 The national socio-economic context

Like most of its Central Asian peers, the Kyrgyz Republic is a mountainous and predominantly agrarian country with a slowly growing population of approximately 5.9 million inhabitants (National Statistic Committee (NSC), 2015). Its population is relatively young, with approximately 31.4 per cent of the population below the age of 15, and just 4.3 per cent of the population aged 65 or older in 2015 (NSC, 2015). In international development rankings, the Kyrgyz Republic ranks 125 out of 187 countries in the Human Development Index (UNDP, 2014), and 136 out of 175 countries in the Transparency International Corruption Perception index (Transparency International (TI), 2014). Life expectancy at birth is estimated at 70.4 years (NSC, 2014) – 66.5 for men and 74.5 for women. Persons 25 years or older have an average of 9.3 years of schooling and a high adult literacy rate of 99.2 per cent (NSC Population Census, 2009). Since 2014, the Kyrgyz Republic has been reclassified from a low-income country to a lower middle-income country according to the World Bank’s Income Classifications.

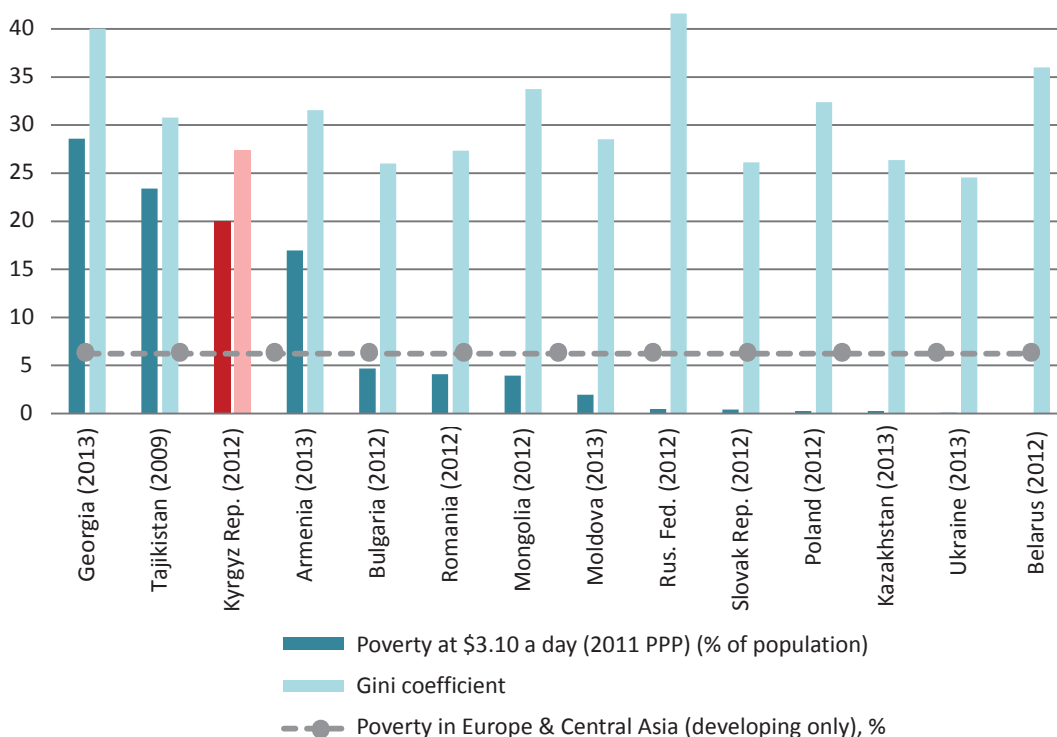
After 1992, the Kyrgyz Republic went through a path of transition towards a market-based economy. Since then, economic growth has been mainly driven by the development of service and trade sectors as well as by remittances from labour migration activities. Growth trends have been disrupted from time to time because of socio-political conflicts in the country. Partly due to economic and political instability, including a global crisis in 2008 and an unexpected change of the Kyrgyz government in 2010–2011, the average gross domestic product (GDP) growth rate remained at 4 per cent from 2001 to 2012 (NSC of the Kyrgyz Republic 2014).

The average GDP growth rate reached 4.1 per cent in 2014 and 7.1 per cent in 2015 (NSC, 2015). Despite moderate but stable economic growth in the last years, the Kyrgyz Republic has been facing major challenges in terms of fiscal deficit, informality, economic inequality, social exclusion and lacking opportunities for decent work, especially for young people. The Kyrgyz Integrated Household Survey (KIHS) conducted in 2014 indicated that the general unemployment rate is eight per cent (seven per cent for males and 9.5 per cent for females). According to “The Social Protection Development Programme of the Kyrgyz Republic for 2015–2017” (hereafter “the Programme”), the share of informal economic activities (particularly in the service and agricultural sectors) amounted between 39 and 42 per cent of all economic activities in 2012. Moreover, the labour market is characterized by a declining employment to population ratio and labour force participation. Global economic and financial crises, internal socio-political conflicts in 2010 as well as the food-price crisis have contributed to these challenges with consequent effects on lower

economic growth and greater poverty and inequality, diminishing the quality of life in the country (International Monetary Fund (IMF), 2014).

In the Kyrgyz Republic, the target benchmarks on a number of indicators for Millennium Development Goals (MDGs) have been already achieved, including ensuring environmental sustainability (MDG 7) and establishing a global partnership for development (MDG 8). Good progress has been made on reducing child mortality (MDG 4). However, the attainment of a number of other targets is estimated to be unlikely, including in relation to MDG 1, for which progress had seemed unshakable, but recently has begun to reverse, and for MDG3. The situation with maternal mortality and combating HIV/AIDS is alarming (UN, 2014).

Figure 1. Poverty incidence: Regional comparison in Europe and Central Asia, most recent year



Source: Figure was designed by the authors based on the WDI database available at <http://data.worldbank.org/indicator/SI.POV.GINI?page=1>

Notes:

(1) The latest available data is for 2012–2013 except Tajikistan (2009).

(2) In Figure 1, the Gini index describes income disparity, with a value of 0 indicating perfect equality and 100 perfect inequality.

Compared to other countries in the region, poverty and inequality are high in the Kyrgyz Republic. Twenty per cent of the population living on US\$ 3.10 per day or less and the Gini index of 27.4 in 2012 (see figure 1). The National Statistical Committee (NSC) calculates

two national poverty lines using the KIHS. The extreme poverty line counts households and individuals with an actual consumption level below the minimum required daily calorie intake of 2,100 kcal per person (without taking into consideration a balanced set of nutritious products). The poverty line looks at food and non-food goods and services deemed necessary to satisfy all basic needs.

The “subsistence minimum” is a normative standard established by law.¹ Subsistence minimum is determined for different population groups (children (0–17), working age, and older people). Its food component uses the threshold of 2,100 kcal intake per adult person for over 12 different categories, consisting 32 food items (differentiating this measure from the extreme poverty line measure). Calculation of the subsistence minimum is quarterly made by the NSC, based on minimum levels of consumption, subsistence minimum structure for the main social-demographic groups of population and average prices on food items in each region of the country.

In 2014, about 1.8 million people lived below the poverty line, of whom 31.8 per cent were urban residents and 68.2 per cent were residents in rural settlements. According to the NSC, the poverty rate decreased from 38 to 37 per cent in 2012–2013 and from 37 to 30.6 per cent in 2013–2014. However, while the poverty rate in 2012–2013 decreased in urban areas from 35.4 to 28.5 per cent, it actually increased in rural areas from 39.6 per cent to 41.4 per cent. In 2013–2014, the poverty rate decreased from 28.5 to 26.9 per cent in urban areas and from 41.4 per cent to 32.6 per cent in rural areas. In 2015, poverty rate has begun to reverse, increasing up to 32.1 per cent (NSC, 2014).

In the case of extreme poverty, approximately 159,000 (2.8 per cent of population) in 2013 and 71,000 people (1.2 per cent of population) in 2014, were under extreme poverty, resulting in a significant reduction of the extreme poverty level (NSC, 2013 and 2014).

There are significant regional disparities, with the highest poverty levels in Jalal-Abad oblast (45.1 per cent), Batken oblast (41.2 per cent) and Naryn oblast (38 per cent) in 2015 (NSC, 2015).

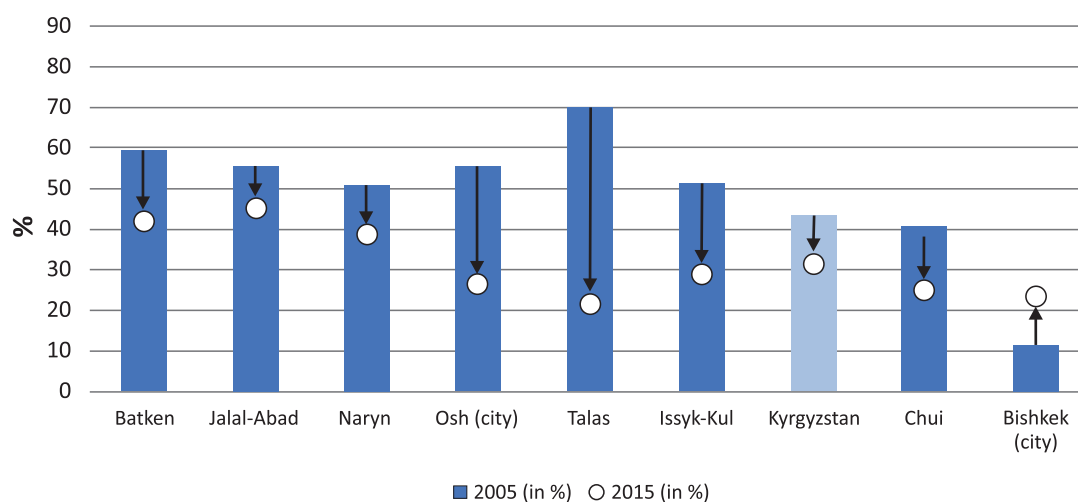
¹ The Law on Guaranteed Minimum Social Standards of May 26, 2009, No. 170. The general poverty line in 2013 was defined at 27,768.5 Kyrgyzstani Som (KGS) per capita per year; extreme poverty was 16,249.5 KGS and in 2014, the values were 29,825 KGS and 17,588 KGS respectively.

Table 1. Trends in poverty rates in the Kyrgyz Republic, 2005, 2008, 2014 and 2015

Percentage and years				
	2005	2008	2014	2015
Kyrgyz Republic	43.1	31.7	30.6	32.1
Type of region				
Urban	50.8	22.6	26.9	29.3
Rural	50.8	36.8	32.6	33.6
Oblast				
Issyk-Kul	51.5	52.2	26	28.9
Jalal-Abad	55.9	40.1	46.4	45.1
Naryn	51.2	42.7	30.6	38
Batken	59.1	20.7	40.7	41.2
Osh (until 2013 including Osh city)	55.9	37.5	31.7	28.9
Talas	69.7	41.9	19	21.5
Chui	40.5	15.7	21.6	24.8
Bishkek	10.8	15.2	17.6	23.5

Source: KIHS 2005, 2008, 2014 and 2015.

Figure 2. Decrease in the poverty levels by region in the Kyrgyz Republic, 2005–2014

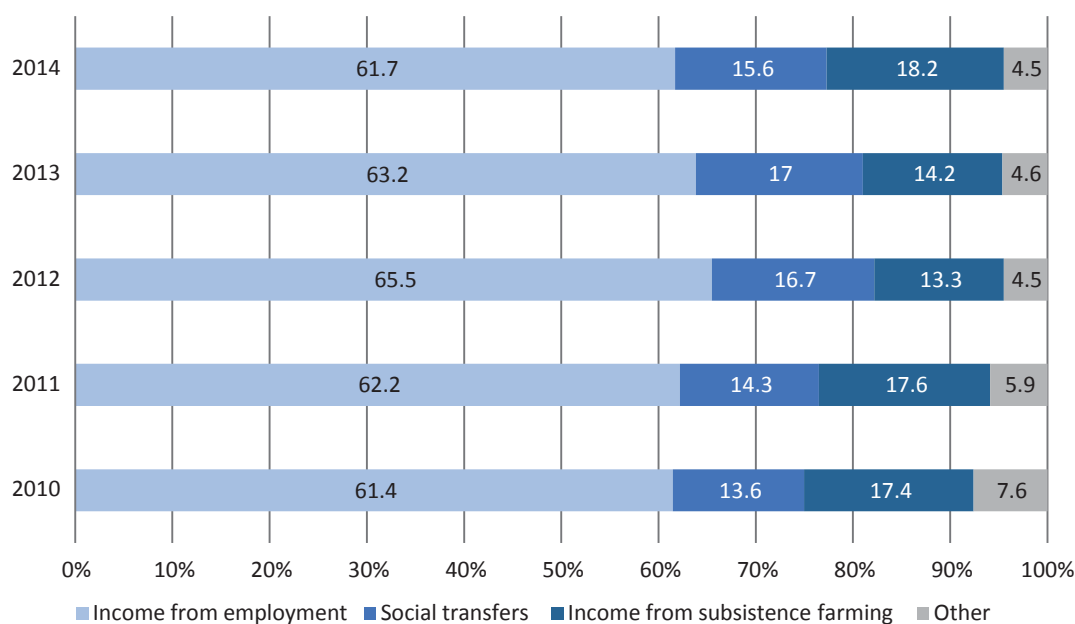


Source: KIHS 2005 and 2015.

Labour activities are the most significant income source for the population (accounting for 65 per cent of total income in 2015). According to the Programme, 52 per cent of wages in the private sector were provided without social insurance contributions and the share of informal economic activities (particularly in the service and agricultural sectors) amounted to 39–42 per cent in 2012. Regarding the impacts of labour migration, 26 per cent of households have at least one family member working abroad. The total number of Kyrgyz labour migrants is estimated to be between 700,000 and one million, with the majority working in the Russian Federation (UNDP, 2012). The size of the informal economy and labour migration affects the number of persons covered by the social insurance scheme in the Kyrgyz Republic.

The second and third largest sources of income for households are social transfers and income from farming (social transfers accounted for 16.2 per cent and income from farming accounted for 14 per cent in 2015). An adequate level of social transfers can significantly reduce poverty and inequality, including extreme poverty in the country (World Bank, 2014). The positive impacts of social transfers have made social protection one of the most important policy priorities of the government. The government has taken actions to maintain and improve social protection coverage and benefit levels. Therefore, as stated in the Programme, the average pension amount increased in 2013 by 5.9 per cent compared to 2012, amounting to 4,432 KGS. The average pension is slightly higher than the pensioner’s subsistence minimum by 6.6 per cent. The average amount of monthly benefit to low-income families with children (MBLIF) was increased by 59.8 per cent (from 305 KGS in 2011 to 487.4 KGS in 2013). Thus, MBLIF is just 8.22 per cent of the children’s subsistence minimum in 2011 and 12.45 per cent in 2013 (the Programme, 2015).

Figure 3. Income structure of population, 2010 – 2014

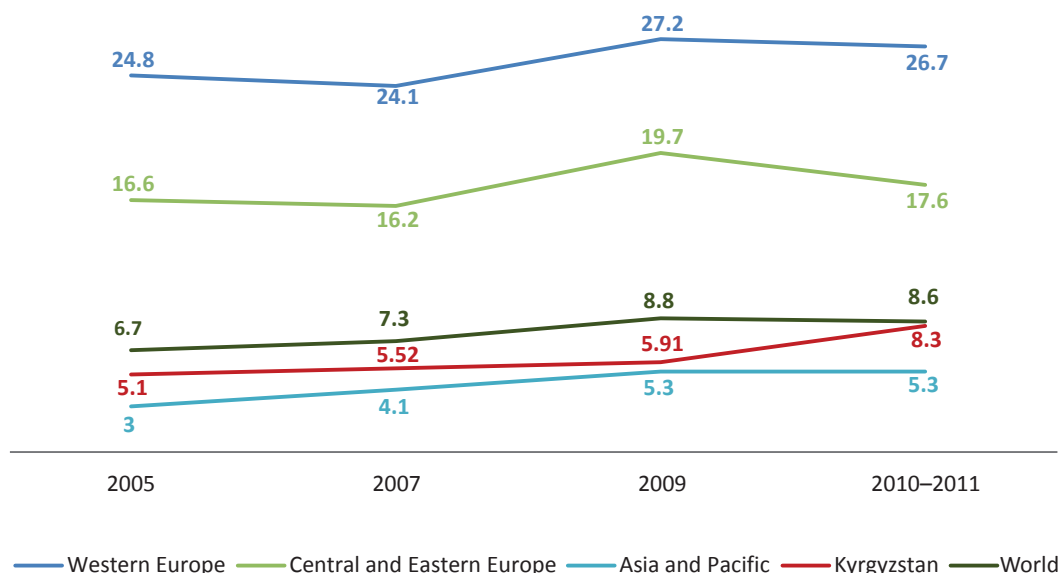


Source: National Statistical Committee, 2014.

1.2 Social protection expenditure

This section analyses data on social protection expenditures in the Kyrgyz Republic. Data are disaggregated by children, working age people, older people as well as health care for all in accordance with the four SPF guarantees. Worldwide, 8.6 per cent of GDP was allocated to social protection expenditures (including health) in 2010–2011. According to the World Social Protection Report (WSPR) 2014/15, the levels of social protection expenditure as a percentage of GDP vary by regions: 26.7 per cent in Western Europe, 17.6 per cent in Central and Eastern Europe and 5.3 per cent in Asia and Pacific. In the Kyrgyz Republic, 8.3 per cent of GDP was allocated to social protection (see figure 4).

Figure 4. Total public social protection expenditure (including health): Regional comparisons, 2005–2011 (per cent of GDP)

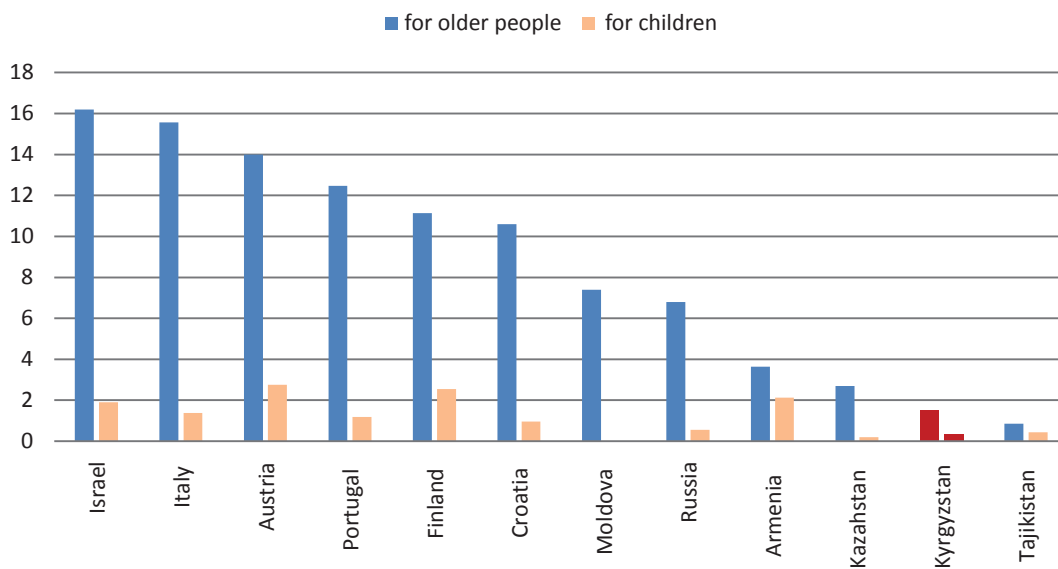


Source: Figure was designed by the authors based on the WSPR 2014–2015.

In 2011, public expenditure on social protection for older people amounted to 3.3 per cent of total GDP worldwide, whereas countries in Central and Eastern Europe spent on average 8.3 per cent and countries in Asia and Pacific averaged two per cent. In the Kyrgyz Republic, 1.54 per cent of GDP was allocated to social protection for older people in 2011.

Worldwide, 0.4 per cent of GDP was allocated to social protection for children. Central and Eastern European countries spent on average 0.8 per cent and Asian and Pacific countries spent on average 0.2 per cent. The Kyrgyz Republic spent 0.33 per cent in 2010.

Figure 5. Public expenditure on social protection for older people and children, as per cent of GDP, 2009–2012



Source: ILO World Social Protection Report 2014/15.

Note: No available data on social protection public expenditures for children in Moldova.

According to the NSC, the share of public expenditure on social protection (including health) against total public expenditure increased from 24 per cent to 28.6 per cent from 2010 to 2014. Out of 28.6 per cent, 9.3 per cent were allocated to public health care and 19.2 per cent were for the others in 2014.

Table 2. Public social protection expenditure in the Kyrgyz Republic: By SPF guarantees, latest available year (per cent of total government expenditure)

		2010	2011	2012	2013	2014
Total public social protection expenditure as % of total expenditure		24.0	24.4	25.8	30.2	28.6
1. Public health care expenditure	Ambulatory and clinical service	7.0	8.0	8.7	9.8	8.6
	Other healthcare services	0.8	0.8	0.8	0.8	0.7
2. Other Social protection expenditures		16.1	15.6	16.3	19.6	19.2
a. Social protection expenditure on older people		8.2	8.5	10.0	12.5	12.9
b. Social protection expenditure on adults	Sickness, maternity, employment injury, disability	0.3	0.3	0.3	0.4	0.4
	Unemployment	0.3	0.2	0.1	0.1	0.1
	Social institutions	3.4	3.0	1.9	1.9	1.7
c. Social protection expenditure on family and children		3.4	3.2	3.1	4.1	3.7
d. Other		0.4	0.4	0.8	0.5	0.5

Source: Statistics in the Kyrgyz Republic – annual publication – 2010–2014.

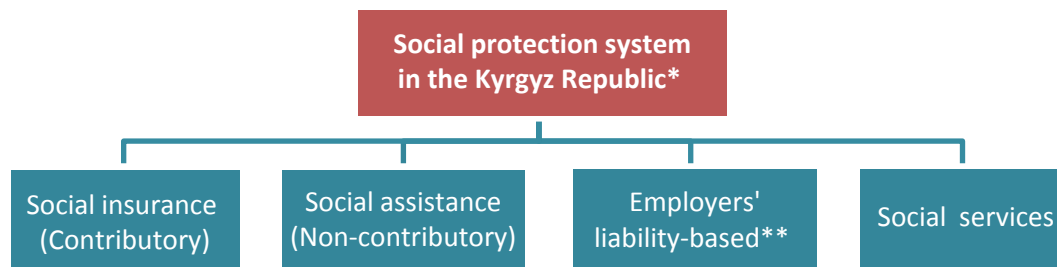
Despite a gradual increase of public social protection expenditures and a decrease in poverty rates, the non-contributory social benefits have not yet reached the level of subsistence minimum, which is officially the minimum standard for living in the country (the Programme, 2015).

1.3 The social protection system

The social protection system in the Kyrgyz Republic has been undergoing several reforms in order to be suitable for the present socio-economic environment. The current social protection system the Kyrgyz Republic has consists of four components:

- (1) Social insurance (pension, health and temporal incapacity insurance);
- (2) Social assistance (social benefits for vulnerable groups and those who do not have the rights to receive social insurance payments);
- (3) Employers' liability-based scheme; and
- (4) Social services.

Figure 6. Structure of the social protection system in the Kyrgyz Republic



Source: The figure was designed by the authors based on the assessment matrix and national legal framework of the Kyrgyz Republic.

Notes: * The overview does not reflect the pension security of military staff.

** Co-financing by the employers' direct payment and state budget.

1.3.1 The social insurance system

The social insurance system is contributory-based, with social insurance contributions paid by the employers (17 per cent of gross wage) and employees (10 per cent of gross wage). The system provides protection for workers in the event of social risks, such as retirement, unemployment, disability, death of breadwinner and sickness. Out of the total contribution (27 per cent of gross wage), 25 per cent goes to pension insurance (23 per cent to the insurance component and two per cent to mandatory individual savings accounts) and another two per cent goes to health insurance. Out of the ten per cent employee contribution, two per cent directly goes to their mandatory individual savings account.

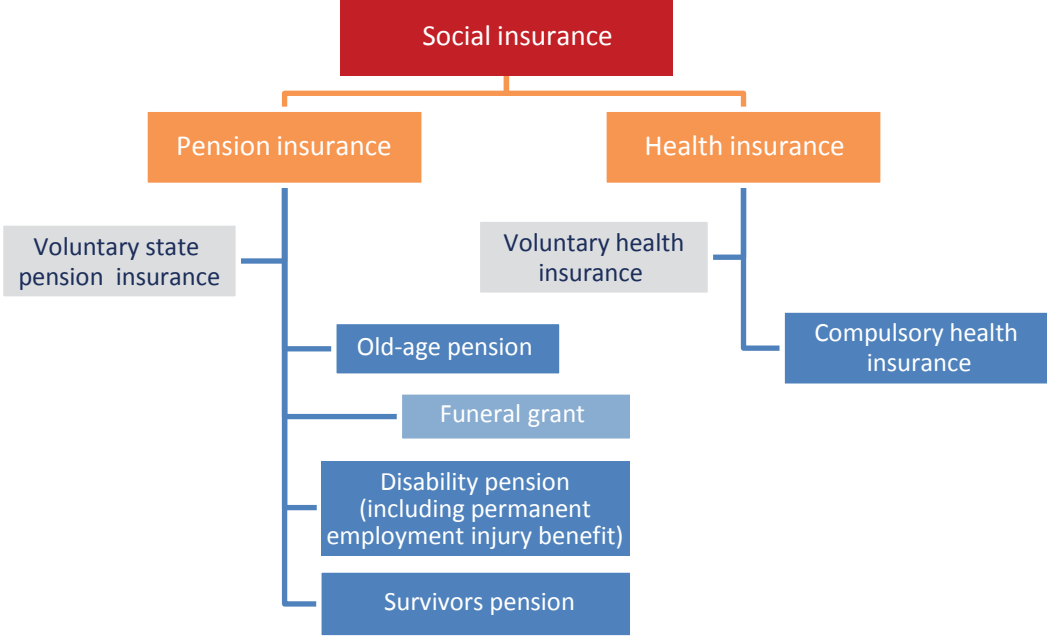
Self-employed workers pay only ten per cent of their income, with nine per cent going to pension insurance and another one per cent to health insurance. Since the 1 January 2015, farmers with property of less than two hectares pay only 0.5 per cent of the average regional or city wage. Farmers with property of two to ten hectares pay 1 per cent and those with more than ten hectares pay 2 per cent. Since the 1 January 2015, all three categories of farmers saw a gradual increase in their contribution rates, up to four per cent of the average wage.²

Pension insurance in the Kyrgyz Republic includes three types of pensions: an old-age pension, a disability pension and a survivor pension. The old-age pension consists of a basic part (which is a state-financed basic component amounting to 1,500 KGS), and a part financed by insurance from the 23 per cent of contributions described in the previous paragraph (out of this 23 per cent, three per cent is spent on covering the existing pensioners under the pay-as-you-go system).³

² Here, farmers are defined as individuals (including those engaging into subsistence farming activities) who are neither a member of cooperatives nor the employers/employees of the enterprises.

³ In the CIS region, the technical terms of pay-as-you-go and funded systems are still commonly used instead of defined-benefit and defined-contribution schemes.

Figure 7. Structure of social insurance system in the Kyrgyz Republic



Source: The figure was designed by the authors based on the assessment matrix and national legal framework of the Kyrgyz Republic.

People employed with labour contracts are required to participate in the social insurance scheme on a mandatory basis while special groups like farmers, informal workers and self-employed workers often do not participate in the scheme due to lack of effective and equitable tools of control.

The latest data on the number of labour force contributors are shown in Table 3. The employers and employees pay social insurance contributions to the Social Fund and Compulsory Medical Insurance Fund. The total number of contributors to the national social insurance scheme include not only the employees but also self-employed and informal-sector workers who self-finance contributions to the national social insurance scheme. In 2009–2013, total number of contributors to the national social insurance scheme increased.

Table 3. Number contributors to social insurance scheme and labour force

	Total number of contributors		Number of contributors employed in formal sector		Labour force, thousands
	thousands	% of labour force	thousands	% of total contributors	
2009	1,131.2	47.7	747.4	66.1	2,372.2
2010	1,163.0	48.3	733.7	63.1	2,406.4
2011	1,183.5	48.6	723.1	61.1	2,435.9
2012	1,292.6	52.9	724.0	56.0	2,445.6
2013	1,330.8	54.9	785.9	59.1	2,425.2

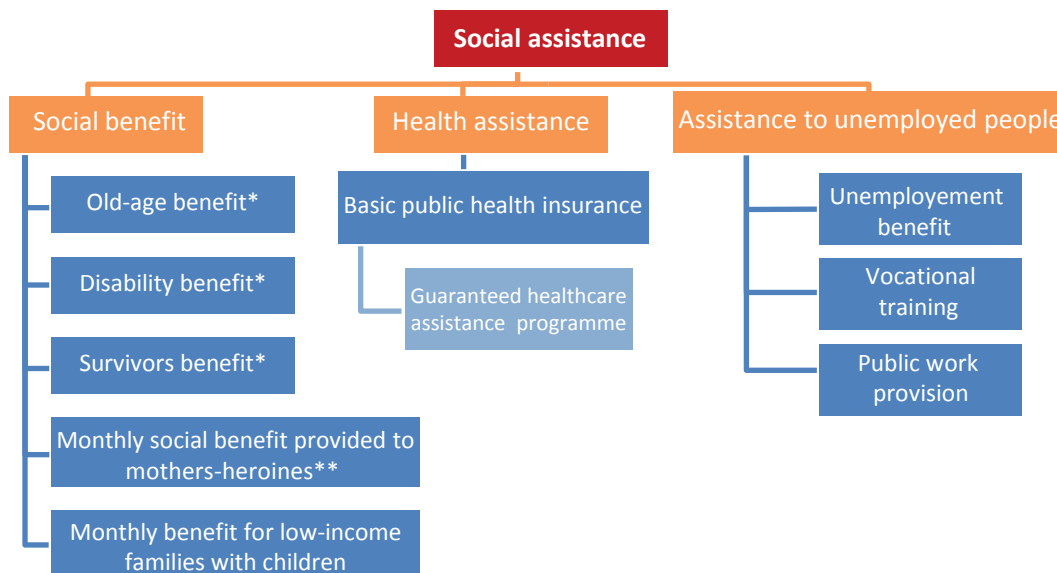
Source: Social Fund of the Kyrgyz Republic, 2015.

1.3.2 The social assistance system

The social assistance system includes non-contributory based social benefits, monthly benefits, grants and various social supports targeted to certain groups of the population. The social assistance system is divided into three categories:

- a. social benefits which are cash-based benefits mostly financed by state or local budgets;
- b. health assistance which covers all Kyrgyz citizens; and
- c. assistance for unemployed people which includes both cash benefits and active employment programmes.

Figure 8. Structure of the social assistance system in the Kyrgyz Republic



Source: The figure was designed based on the assessment matrix and national legal framework of the Kyrgyz Republic.

Notes: * Old age benefit: Men at the age of 65 years and women at the age of 60 years are eligible. Disability benefit: Disabled since childhood of group I, II or III disability without the right to pension security and disabled persons of group I, II or III disability without the right to state social pension insurance are eligible. Survivors benefit: The system only covers children (survivor benefit provided to children born of parents with HIV/AIDS, and child disability benefit).

** Mothers with more than 7 children are qualified to benefit at the age of 55 years, while the age of retirement for women is 58 years.

Social benefits (state benefits) are provided when the income of at least one member of a household is lower than the guaranteed minimum income per month (GMI)⁴ or the individual does not have the right to receive social insurance benefits. The first case refers to MBLIF and the second case refers to old-age, disability, and survivor benefits as well as funeral grants. Monthly social benefits, provided to mother-heroines, is paid as a privilege at the pre-retirement of women with more than seven children.

GMI is a budget-driven threshold, which determines eligibility for a means-tested monthly benefit targeted to low income families with children. The amount of the GMI is adjusted

⁴ Guaranteed minimum income is an annually adjusted indicator (by the Government) based on budgetary fiscal spaces, economic conditions and subsistence minimum, and it secures a basic income for low-income families with children. Taking into account families' vulnerability and needs, the GMI is used in adjusting the benefit amounts to be paid to low-income families with children. GMI should be close to the subsistence minimum stated in the legislation (extracts from the Government Decree No.825, December 2009). The amount of GMI as of June 2016 is 805 KGS which is equal to US\$ 11.29, according to the UN Operational Rate of Exchange as of 01 June 2016 (1 USD=71.2918 KGS).

on an irregular basis as it depends on available government financial resources. Adequacy of the GMI and of the MBLIF benefit remains a key concern and low benefits reduce the effectiveness of this scheme in reducing poverty. However, the social assistance scheme plays an important role in providing public support to the most vulnerable groups in society and thus reducing poverty in the country. There is also a separate non-contributory pension scheme for the military staff, which is fully financed from the state budget.

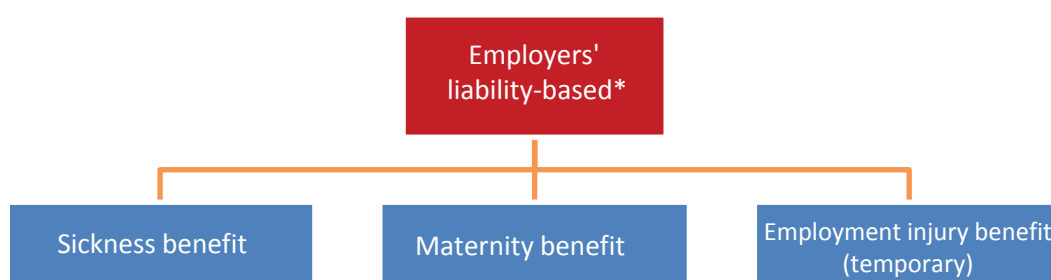
Social assistance for old-age, disability and survivor benefits are provided to citizens, who are not eligible for the social-insurance benefits of an old-age pension, disability pension, or survivors' pension.

MBLIF, which is based on beneficiary identification and means-tested indicators, is the only social benefit targeted to the poor population.⁵ The scheme provides monthly cash benefits targeted to children, and aims to bring household per capita income up to the GMI level.

1.3.3 The employers' liability based assistance scheme

Employers are required by law and government decree to insure against liability for injury and disease to their employees arising out of their employment. They are also required to pay maternity benefits to formally employed women. Injury and disease benefits are directly paid by the employer through its own resources. Maternity and sickness benefits are also directly paid by the employer through its own resources for the first ten working days, with state budget covering from the 11th working day onward (employers' liability based system is shown in Figure 9).

Figure 9. Structure of the employers' liability based assistance system in case of temporary incapacity in the Kyrgyz Republic



Source: The figure was designed based on the assessment matrix and national legal framework of the Kyrgyz Republic.

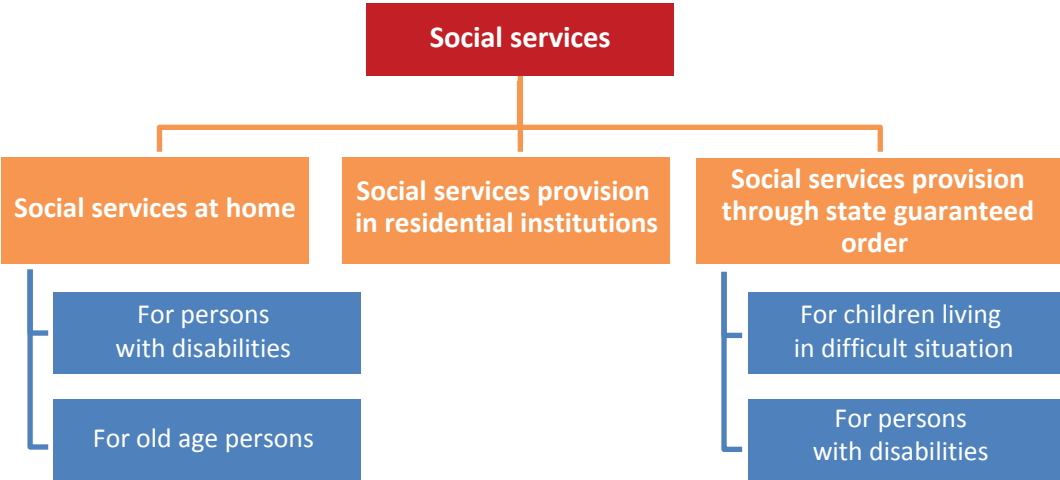
Note: * Co-financing by the employer and state budget financing.

⁵ Families with per capita income below the GMI are eligible for MBLIF. MBLIF is one-fifth of the child subsistence minimum.

1.3.4 The social service

The fourth component is social services. According to the Law No.111 of the Kyrgyz Republic “On the basic principles of social services provision to population”, social servicing is the activity of social services aimed to provide social and legal assistance, benefits, and services on social adaptation and rehabilitation of deprived citizens. The social service system includes the following types of facilities: residential care facilities for elderly and disabled people, for disabled children, for orphans and children deprived of parental care; centres for elderly, disabled persons, and disabled children; centres for in-home care provision; social shelters for children and non-adults; social rehabilitation centres for children and other individuals with disabilities; centres providing social assistance to families and children; urgent psychological counselling centres (telephone emergency services, etc.); urgent social assistance services (mobile teams); funeral services and social welfare services. All these services are provided free of charge by special social centres.

Figure 10. Structure of the social service component in the Kyrgyz Republic



Source: The figure was designed based on the assessment matrix and national legal framework of the Kyrgyz Republic.

1.4 National development frameworks related to social protection

In 2011, the Kyrgyz government adopted “The Medium Term Development Programme (2012–2014)” which was aimed at strengthening macro-economic stability, reducing inflation and ensuring sustainable economic growth.

Following the above-mentioned programme, the Kyrgyz government adopted Decree No.85 to officially approve “The Social Protection Development Programme of the Kyrgyz Republic for 2015–2017” in February, 2015 where the ABND was included as an implementation tool for improving the national SPFs. In the Programme, particular emphasis was given to strengthening the social assistance component. The priorities listed in the Programme are:

- Social protection for children and families, living in a difficult situation;
- Social protection for persons with disabilities; and
- Social protection for old-age persons.

Direct technical assistance to support the implementation of the Social Protection Development Programme of the Kyrgyz Republic for 2015–2017 also contributes to improve the national SPFs in the Kyrgyz Republic.

In addition, the United Nations Development Assistance Framework (2012–2016) in the Kyrgyz Republic has three main pillars: 1) Peace and cohesion, effective democratic governance and human rights; 2) social inclusion and equity; and 3) inclusive and sustainable job-rich growth to poverty reduction. The second pillar focuses on social protection, food security, education and health. Its outcome specifically states “By 2016, vulnerable groups benefit from improved social protection, namely: food security; maternal and child health, reproductive health services; nutrition; education; reducing sexually transmitted infections, human immunodeficiency virus, tuberculosis; and social protection services and benefits.

The Government is currently preparing the medium-term development programme for 2018-2022, the Ministry of Labor and Social Development has begun to develop the social development strategy for the same period as well. The findings of national dialogue and this report can be taken into consideration and reflected in the strategic documents.

2 Assessment-based national dialogue in the Kyrgyz Republic: Objectives, methodology and process

2.1 Objectives

The ILO collaborated with the government, social partners, civil society, independent experts, and UN agencies in the Kyrgyz Republic to conduct an assessment-based national dialogue (ABND) exercise on social protection. It reviewed the present social protection system to understand what elements of national SPFs are in place and where “gaps” in the SPFs exist.

The assessment-based national dialogue exercise’s main objectives are to:

1. organize a national dialogue on social protection with all key stakeholders in the country, including the Government of the Kyrgyz Republic, social partners, civil society organizations, independent experts and the UN agencies, while raising awareness on the social protection floor concept and increasing capacities in policy formulation and planning;
2. contribute to the National Strategy for Sustainable Development and the Mid-Term Development Plan of the Kyrgyz Republic;
3. identify priority areas for the Government’s intervention in the field of social protection with a mid- to long-term perspective and determine the necessary measures for the establishment of a more comprehensive, rights-based, and systemic social protection floor; and
4. support informed decision making towards the future development of a nationally defined social protection floor.

2.2 ABND methodology applied to the Kyrgyz Republic

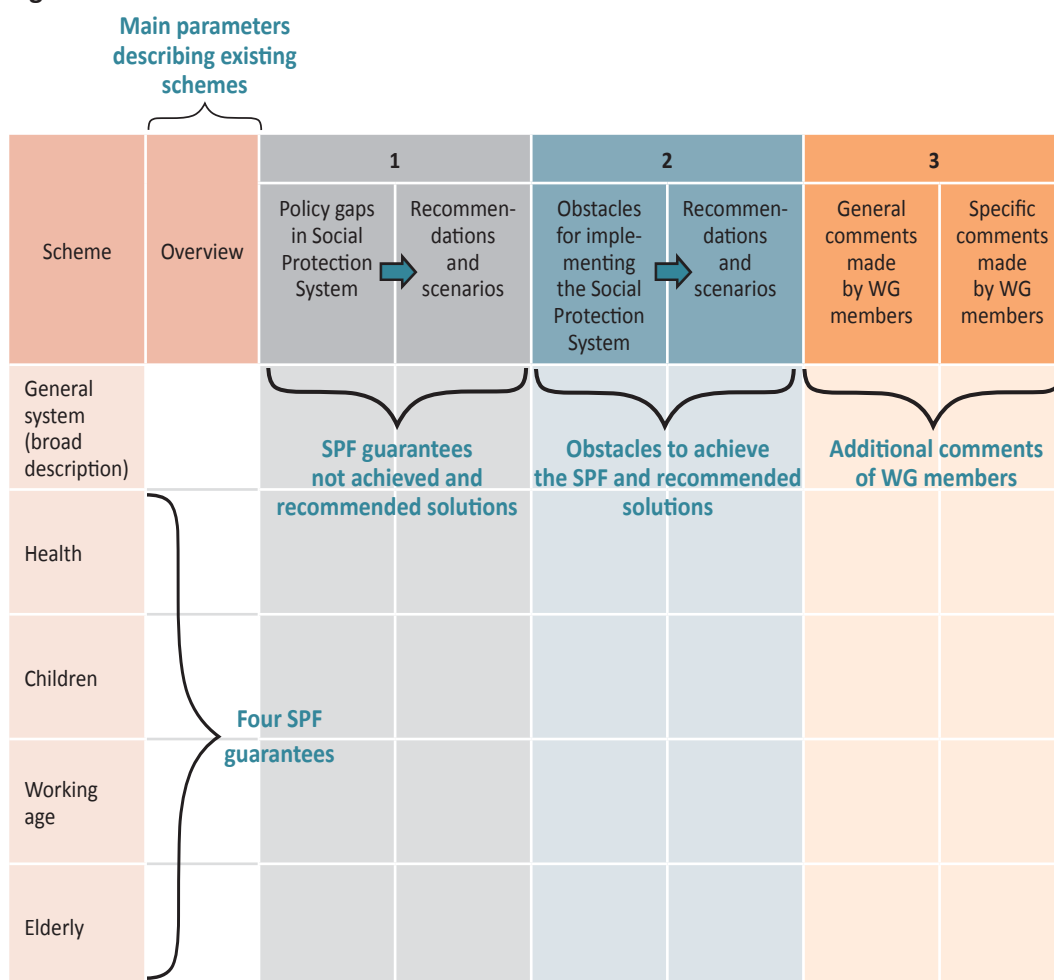
The assessment matrix describes the existing social protection system and identifies policy gaps and obstacles for implementing social protection systems in each of the four basic guarantees of the national SPF. This assessment helps to draw recommendations for the further design and implementation of social protection provisions to reach at least the social protection floor for the population. The subsequent costing exercise estimates the cost of introducing these additional social protection provisions. The steps undertaken for the ABND exercise in the Kyrgyz Republic are described below.

2.2.1 Development of the assessment matrix

An assessment matrix contains an inventory of the existing social protection system on four SPF guarantees. Based on the review of existing programmes and schemes, policy gaps and obstacles for implementation are identified. In addition, a number of recommendations for extending and improving social protection provisions are provided, with the aim of guaranteeing a minimum level of social protection to all.

The assessment matrix is a tool to analyse the extent to which existing and planned social protection provisions match the benchmarks set by the four guarantees of the social protection floor framework and to support the identification of policy priorities to complete such a floor. For each of the SPF guarantees, the matrix lists existing and planned social protection provisions, their legal and effective coverage, policy gaps, and implementation issues. It then identifies opportunities for improvement through recommendations.

Figure 11. Structure of the assessment matrix



Source: The assessment matrix is available on the ILO Social Protection Platform on⁶: <http://www.social-protection.org/gimi/gess/ShowProject.action?id=2790>

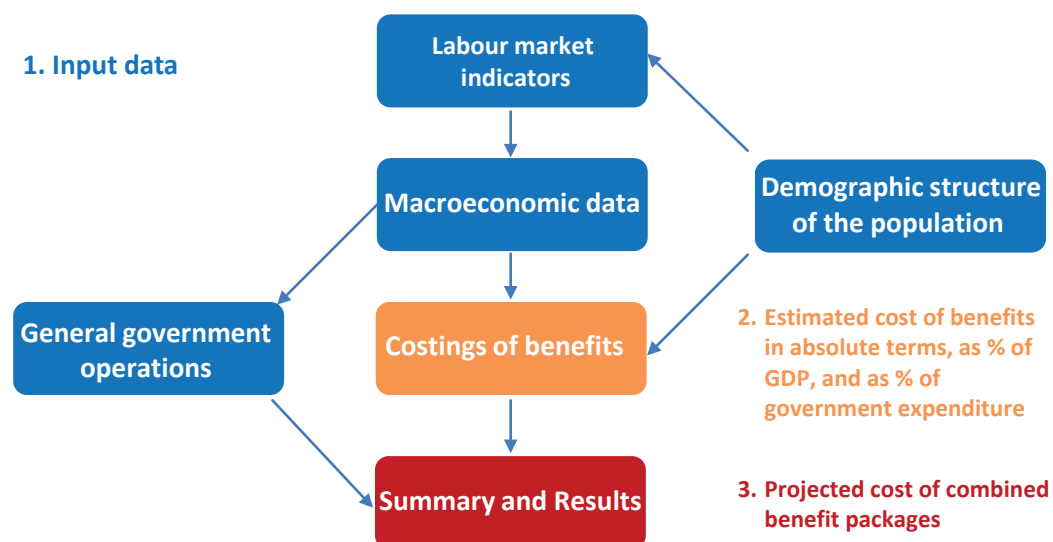
⁶ Website last accessed 17 July 2016.

2.2.2 Costing projections of selected SPFs

Referring to the analysis summarized in the assessment matrix as well as the results of preliminary costing projections, the SPF working group members are to reach a consensus on the prioritization of actions in the field of social protection in the Kyrgyz Republic. Consequently, the agreed results can be reflected to the next national strategic programme on social protection after 2017. The methodology used for financial projection is based on the ILO's costing tool. The structure of logic for this tool is presented in Figure 12.

The first part is used to input national data. Statistical data about the population of the country, its labour market indicators, macroeconomic data and forecasts, and government operations were collected by the ILO and entered into the financial projection model.

Figure 12. Structure of Rapid Assessment Protocol



At the second part (estimated cost of benefits), the ILO calculated various scenarios for four guarantees of the matrix. The preliminary results for these scenarios were presented to the SPF-WG members at the second ABND. The most cost-effective scenarios were discussed in the working groups.

The third part (projected cost of combined benefit packages) is to present the final results of the financial projection model in the SPF report. Only one of the identified priorities: increasing the maternity benefit level will be presented in detail in Volume two of the report. The results of the cost calculations and projections are expressed in national currency, as a percentage of GDP, and as a percentage of government expenditures.

2.3 ABND in the Kyrgyz Republic: process and the recommendations

The ABND exercise in the Kyrgyz Republic was launched on 4 December 2014 in Bishkek by Mr. Kuikeev E., Deputy Minister of Labour and Social Development (MLSD)⁷, Mr. Asanov U., Deputy Chairman of the Social Fund, high-level Social Partners' representatives of the Kyrgyz Republic, and Dr. Machl S., UN Women Representative/ Officer in Charge of the UN Resident Representative for the Kyrgyz Republic. Based on the consensus reached by the participants of the ABND launch, the MLSD, endorsed by the official decree No.9 on 10 March 2015, officially formed the SPF working group (SPF-WG), to facilitate the ABND in the Kyrgyz Republic.

2.3.1 ABND process followed in the Kyrgyz Republic

The ABND process in the Kyrgyz Republic was based on:

- Social Protection Floors Recommendation, 2012 (No.202);
- National social protection legislation, decrees, legal regulations and official data on socio-economic issues;
- International and national analytical reports;
- Multilateral and bilateral consultations on technical issues with working group members;
- Participatory-based technical and political national dialogues and roundtables.

Step One: Development of the assessment matrix

The launch of the ABND: December 2014

A roundtable for launching the ABND was organised by the Government and the UN country team to discuss its relevance. More than 50 representatives attended the event from the ministries, social partners, non-governmental organizations and the UN country agencies. The participants reached a consensus for implementing the ABND in the Kyrgyz Republic.

Formulation of the SPF working group: March 2015

Based on the Action plan of Social Protection Development Programme 2015–2017, Article No.59, a SPF working group on ABND was established on 10 March 2015 by the Ministry of Labour and Social Development (ex. Ministry of Social Development) of the Kyrgyz Republic (Order No.9). The SPF-WG is the multilateral social protection machinery that allows for in-depth deliberations on specific social protection issues. The present SPF-WG in the Kyrgyz Republic consists of the following representatives:

- Government ministries, agencies and funds;
- Civil society and social partners; and
- United Nations agencies, international financial institutions and donor organizations.

⁷ The name of Ministry was amended from the “Ministry of Social Development (MSD)” to the “Ministry of Labour and Social Development” on 16 November 2015 (Decree no.768).

Desk review: March – May 2015

After the establishment of the SPF-WG in March 2015, the ILO, in close collaboration with the SPF working group members, began to compile the assessment matrix based on the existing social security legislation, schemes and social protection programmes. In May 2015, the SPF working members discussed for the first time the current social protection system and the preliminary overview section of the assessment matrix.

Multilateral and bilateral consultations: April 2015 – January 2016

From April 2015 to January 2016, the SPF-WG, led by the ILO, conducted a series of technical consultations for shaping the assessment matrix and achieving consensus on its basic content among stakeholders, including the Ministry of Labour and Social Development, Ministry of Finance, Ministry of Health, Ministry of Economy, Ministry of Education, the Social Fund, the Compulsory Medical Insurance Fund, the National Statistical Committee, the Federation of Trade Unions, the National Employers' Confederation, Non-governmental organizations, the United Nations Development Programme, the Food and Agriculture Organization of the United Nations, the United Nations Children's Fund, the United Nations Population Fund, United Nations Women and others.

First ABND on social protection: June 2015

The preliminary assessment matrix was presented and reviewed at the first ABND on 17–19 June 2015. More than 40 representatives from line ministries, government funds and agencies, social partners, non-governmental organizations and the UN country agencies participated. Based on information available in the assessment matrix, participants discussed and identified the policy gaps and obstacles for implementing the social security schemes and social protection programmes in the country. During the meeting, the participants also started identifying recommendations for addressing the gaps in order to improve the national social protection floors in the Kyrgyz Republic.

Data collection: July 2015 – January 2016

In parallel with multilateral and bilateral consultations, the ILO began to collect data and statistical information on social protection issues in order to develop the costing of different potential scenarios. In October 2015, an ILO technical mission was undertaken to facilitate the process of data collection and validation of available statistical data.

Step Two: Organizing the participatory national dialogue

Second ABND on social protection: February 2016

The SPF-WG was called upon to finalize the assessment matrix and formulate the main recommendations by selecting the priorities for action in the field of social protection. The decisions adopted by the working group were also supported by the key policy makers in the country. On the last day of the second ABND, the SPF-WG presented a set of recommendations and four priorities on social protection. These were adopted at the high-level ABND national roundtable attended by the Vice Prime Minister of the Kyrgyz Republic, Ms. Kudaiberdieva G. and high-level representatives of the line ministries, funds, agencies, social partners and UN agencies (see Annex 1). The adopted recommendations and priorities can be reflected in the next national strategic programme on social protection after 2017.

Step Three: Endorsement of the report

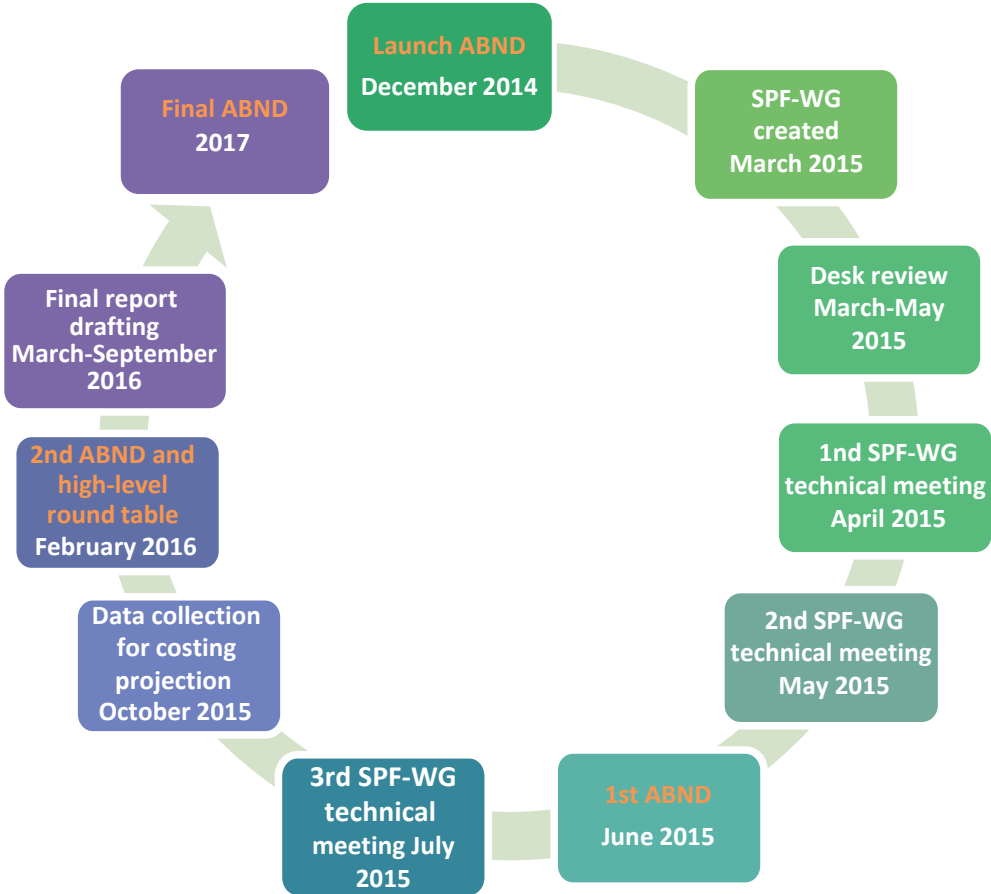
Final report drafting: March – December 2016

The ILO, in its leading position within the ABND Working Group, was in charge of drafting the full text of the final report from March to October 2016. A draft final report was circulated among the SPF working group members for inputs and comments. The final report was prepared and published in English and Russian.

Final ABND on social protection: December 2016

The final report which will consist of the agreed-upon set of recommendations and the preliminary costing of scenarios will be shared with the representatives of government, workers’ and employers’ organizations, non-governmental organizations and the UN agencies and is to be submitted to the Government of the Kyrgyz Republic for official endorsement in the first quarter of 2017. At the same time, discussion has commenced on the next steps, such as legislative and/or feasibility studies for the design of new schemes, expansion of existing schemes, and establishment of coordination mechanisms. The table below summarizes the activities conducted under each of the three steps of the social protection assessment-based national dialogue process.

Figure 13. Steps of the assessment-based national dialogue in Kyrgyz Republic



Source: The figure was designed by the authors based website www.social-protection.org (workspaces, the Kyrgyz Republic).

Box no.1

Policy gaps and obstacles for implementing social protection system in the Kyrgyz Republic: Cross-cutting problems

In the ABND process, the SPF Working Group members identified some fundamental cross-cutting policy gaps and obstacles for implementing social protection programmes which go beyond the four SPF guarantees. Some of the views expressed by the SPF Working Group members are as follows:

Cross-cutting problems on social protection	Recommendations
Limited social protection coverage to informal sector and rural workers	<ul style="list-style-type: none"> – Improvement of targeting mechanisms to identify the beneficiaries; – Improvement of legislative basis to facilitate the extension of social protection coverage.
Lack of coordination at institutional and administrative levels	<ul style="list-style-type: none"> – At the institutional level, improvement of inter-agency cooperation among the national authorities (ministries, public institutions, local government); – At the administrative level, introduction of a single window policy (one-stop shop) to improve social security benefit provisions.
Insufficient inclusion of gender and nutrition-sensitive social protection measures	<ul style="list-style-type: none"> – Preparation of gender-sensitive and sex-disaggregated statistical data; – Application of common nutrition standards⁸ in the nutrition-related legislations.
Application of different poverty and economic indicators for calculating social security benefit amounts ⁹	<ul style="list-style-type: none"> – Application of a common poverty or economic indicator to guarantee minimum incomes for all and to improve transparency of the system.

⁸ These are based on a list of products, caloric value and cash norms.

⁹ Examples of different poverty and economic indicators applied in the Kyrgyz Republic include the food-subsistence minimum, the poverty line, the guaranteed minimum income and the basic rate.

2.3.2 The recommendations adopted by the SPF working group during the second ABND

During the second ABND in February 2016, the SPF working group was divided into the following three sub-groups to select the most needed national priorities for action:

1. Government (ministries and public institutions);
2. The social partners (employers' and workers' organizations) and civil society; and
3. International agencies and the donor community).

Each sub-group selected two priorities for action in each SPF guarantee. The list of priorities selected by each sub-group is as follows:

Health

Government ministries, agencies and funds

- Improving the quality of healthcare services;
- Staffing in the regions (in remote areas).

The social partners and civil society

- Extending coverage of informal workers by compulsory health insurance;
- Improving access of vulnerable groups to inexpensive, high quality medicines.

United Nations agencies, international financial institutions and the donor community

- Defining a minimum quality of health services;
- Ensuring access of vulnerable groups to health services.

Children

Government ministries, agencies and funds

- Increasing the level of monthly benefit to low income families with children;
- Indexing the survivor pension.

The social partners and civil society

- Increasing the level of monthly benefit to low income families with children to the food-subsistence minimum level;
- Extending the access of social services of alternative boarding.

United Nations agencies, international financial institutions and the donor community

- Increasing the level of monthly benefit to low income families with children to the food-subsistence minimum level;
- Improving the social service system.

The working age population

Government ministries, agencies and funds

- Developing mechanisms for formalising labour relations;
- Increasing the maternity benefit.

The social partners and civil society

- Increasing the maternity benefit to not less than two-thirds of income;
- Extending maternity coverage to informal workers.

United Nations agencies, international financial institutions and the donor community

- Increasing the unemployment benefit level;
- Extending maternity protection to the informal sector.

Older people

Government ministries, agencies and funds

- Increasing the pension level;
- Developing alternative services (rehabilitation and day care centres, hospices) at the local level.

The social partners and civil society

- Strengthening the basic component of the old-age pension by increasing it to the subsistence minimum level of the pensioner;
- Increasing the monthly social old-age benefit to the subsistence minimum level of the pensioner.

United Nations agencies, international financial institutions and the donor community

- Strengthening the basic component of the pension;
- Improving the social service system.

Box no.2

Social protection priorities selected at the ABND

In follow up to the list of priorities presented by each stakeholder group mentioned above, a final round of participatory consultations took place and the SPF-WG selected and agreed upon the following recommendations as priorities for further action:

- Increase the old-age pension level
- Increase the monthly benefit to low income families with children
- Improve the social service system
- Increase the level of maternity benefit

3 Policy assessments of the four essential SPF guarantees

3.1 Health care

3.1.1 Present health care system

The Constitution of the Kyrgyz Republic ensures the right to social protection for everybody. In the field of health care, the following specific provisions are stipulated in Article 47:

- Everyone has the right to health protection;
- The state creates conditions for medical services and health care, and takes measures for the development of the national, municipal and private health care sectors;
- Free medical service.

Like the other former socialist countries, the Government of Kyrgyz Republic experienced a severe budgetary constraint in the 1990s and the state budget allocation for the social sector, including the health sector, was drastically reduced as a consequence. The basic structure of the present health care system in the Kyrgyz Republic was developed from 1999 to 2005 based on the following legislation adopted during that period:

- Law No.112 “On health insurance of the citizens” (1999);
- Law No.159 “On the single-payer system for healthcare financing in the Kyrgyz Republic” (2003);
- Government Decree No.215 “Regulations on the Compulsory Health Insurance Fund under the Ministry of Healthcare” (2003) and
- Law No.6 “On health protection of the citizens” (2005).

In the Kyrgyz Republic, the following are the three main health insurance schemes, each of which serves different purposes (detailed information available in Annex 2):

- (1) The Basic Public Health Insurance scheme, which includes the Guaranteed Healthcare Assistance programme;
- (2) Compulsory Health Insurance; and
- (3) Voluntary Health Insurance.

The Basic Public Health Insurance scheme (BPHIS) is the most comprehensive health insurance scheme which covers all Kyrgyz citizens regardless of their employment status. BPHIS consolidates the state budget and Compulsory Health Insurance (CHI) budget on a single account and provides integrated budgetary sources to support public health care

institutions. BPHIS also guarantees provision of preventive assistance to specific target groups (such as children, pensioners, war veterans and persons with disabilities) within the Guaranteed Health Assistance (GHA) programme.

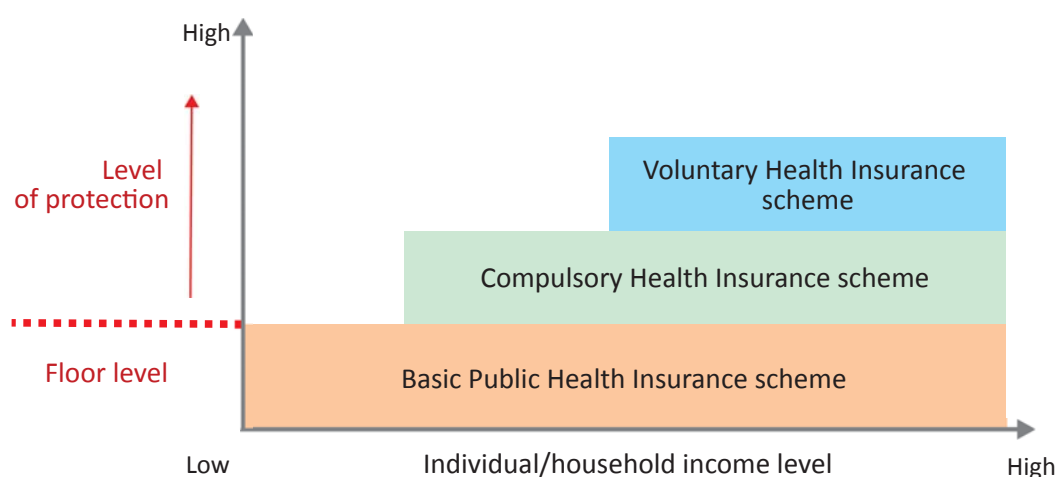
Compulsory Health Insurance (CHI) is a contribution-based health insurance scheme mainly targeted to the formally employed citizens. Contribution rate is set at 2 per cent of the individuals' wage and it is financed by the employer. Apart from the employed citizens, the others, such as self-employed people and non-Kyrgyz citizens residing in the Kyrgyz Republic, are also able to join CHI, as long as they pay contributions to the scheme by themselves.

The Voluntary Health Insurance (VHI) scheme is based on voluntary participation. Funding is managed by voluntary health insurance organizations and companies.

The Ministry of Health takes a leading role in formulating the national health care strategy and policy whereas the Compulsory Health Insurance Fund (CHIF) has been serving as an implementing agency for practical operations of BPHIS and CHI. Except for the voluntary health insurance (VHI) scheme, all other schemes are fully or partially subsidized by the state budget and therefore the Ministry of Finance also plays an important role in policy making and decisions on health care issues.

Figure 14 summarized the three health care schemes in the Kyrgyz Republic: BPHIS for everyone, CHI for the employed population and VHI for those whose choose.

Figure 14. Comprehensive health care system of the Kyrgyz Republic



Source: The figure was designed by the authors based on the assessment matrix and national legal framework of the Kyrgyz Republic.

3.1.2 Analysis of the Kyrgyz health care system

In this section, health care system in the Kyrgyz Republic will be analysed from different angles. Figure 15 presents the analysis of the five key indicators for the national health care system by using the statistical data available in the ILO World Social Protection Report 2014/15:

- **Coverage:** Estimate of population not covered by health care system (%);¹⁰
- **Affordability, Indicator 1:** Out-of-Pocket by households (OOPs) against total health Expenditure (%);¹¹
- **Affordability, Indicator 2:** Coverage gap (%) due to financial resources deficit against MDG target (US\$ 60 for 2015 in low income countries);¹²
- **Quantity (human resource):** Coverage gap (%) due to health professional staff deficit¹³ (ILO benchmark: not fewer than 41.1 per 10,000 population); and
- **Quality (medical service):** Maternal mortality rate (per 10,000 live births).

The five key indicators in Figure 15 generally means if the pentagon size is smaller, the health care system is better and if the pentagon is bigger, it is worse. Figure 15 shows that health care coverage gap in the Kyrgyz Republic is around 17 per cent, meaning 17 per cent of the population does not have access to health care. In comparison, the figure globally is much higher at 40 per cent around the world in general, but in Central and Eastern Europe, just nine per cent of population lacks access to health care.

The findings of affordability – indicator 1 explains that except Western Europe, the percentage of OOPs against the total health expenditure remains around 30 to 40 per cent around the world, including the Kyrgyz Republic.¹⁴ If analysed from the actual spending on health care per capita (excluding OOPs), a substantial coverage gap appears in the Kyrgyz Republic, 45.1 per cent of Kyrgyz population are not supported by public health care spending of at least US\$ 60 per person per year (US\$ 60 as the MDG target benchmark for 2015 in low income countries). According to the World Social Protection Report 2014/15, the actual government expenditure on health per capita in 2011 amounted: US\$ 2,737 in Western Europe, US\$ 287.7 in Eastern Europe, US\$ 479.7 worldwide and US\$ 22.2 in the Kyrgyz Republic.

¹⁰ Here, 'health coverage' includes affiliated members of health insurance or estimation of the population having free access to health care services provided by the State (World Social Protection Report 2014/15, 2014).

¹¹ Out-of-pocket spending by private households is the direct outlay of households, including gratuities and payments in kind, made to health practitioners and suppliers of pharmaceuticals, therapeutic appliances and other goods and services, whose primary intent is to contribute to the restoration or to the enhancement of the health status of individuals or population groups. It includes household payments to public services, non-profit institutions and non-governmental organizations. It includes non-reimbursable cost-sharing, deductibles, co-payments and fee-for-service, but excludes payments made by companies that deliver medical and paramedical benefits, whether required by law or not, to their employees. It excludes payment for overseas treatment (World Social Protection Report 2014/15, 2014).

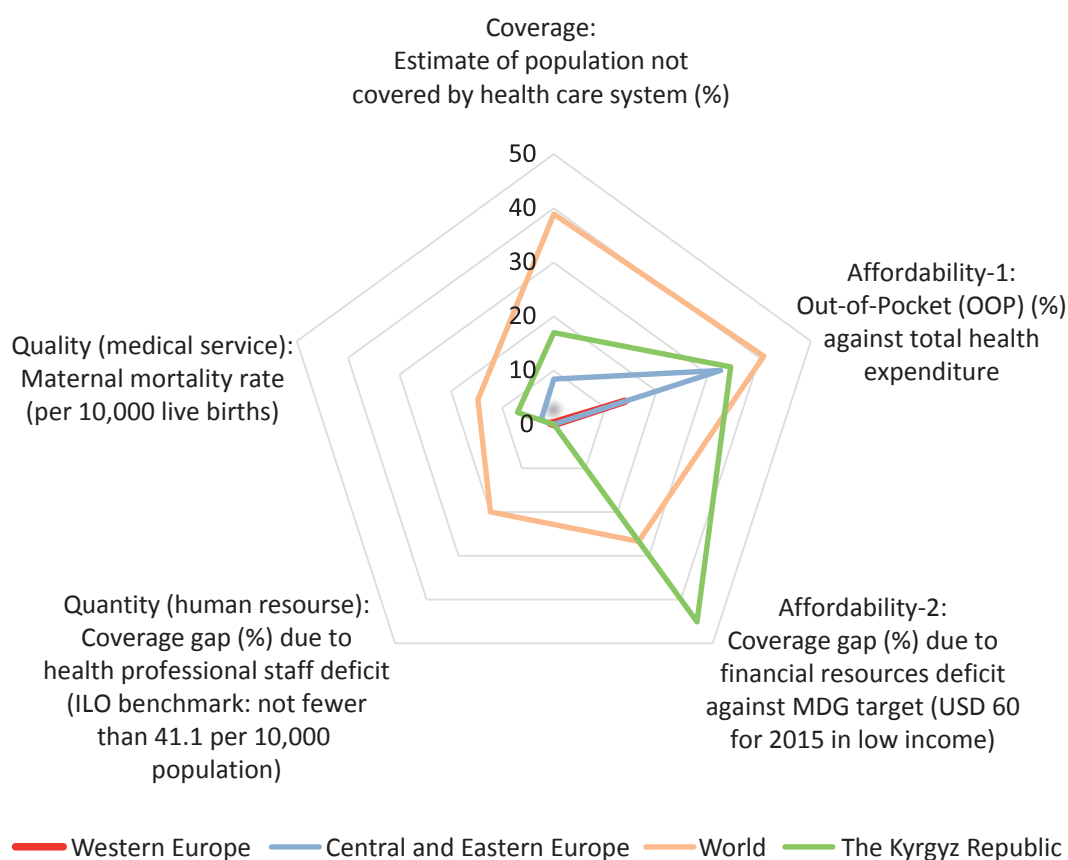
¹² Coverage gap due to financial resources deficit based on median value in low vulnerability group of countries. The ILO financial deficit indicator follows the same principle as the access deficit indicator regarding total health spending (in US\$ per capita and per year) except out-of-pocket payments (World Social Protection Report 2014/15, 2014).

¹³ ILO calculations based on World Health Organization (WHO): National Health Accounts (Global Health Expenditure database) and Global Health Observatory (World Social Protection Report 2014/15, 2014).

¹⁴ OOPs percentage against total health expenditure in North America remains around 11.6 per cent in 2010–11 (World Social Protection Report 2014/15, 2014).

With respect to the number of health professional staff against total population, it is shown that the number of health professional staff in the Kyrgyz Republic is higher than the ILO threshold of 41.1 per 10,000. More detailed analysis on this issue will be provided in the following section. Maternal mortality rate per 10,000 live births in the Kyrgyz Republic is 7.1, which is the highest in the CIS region.

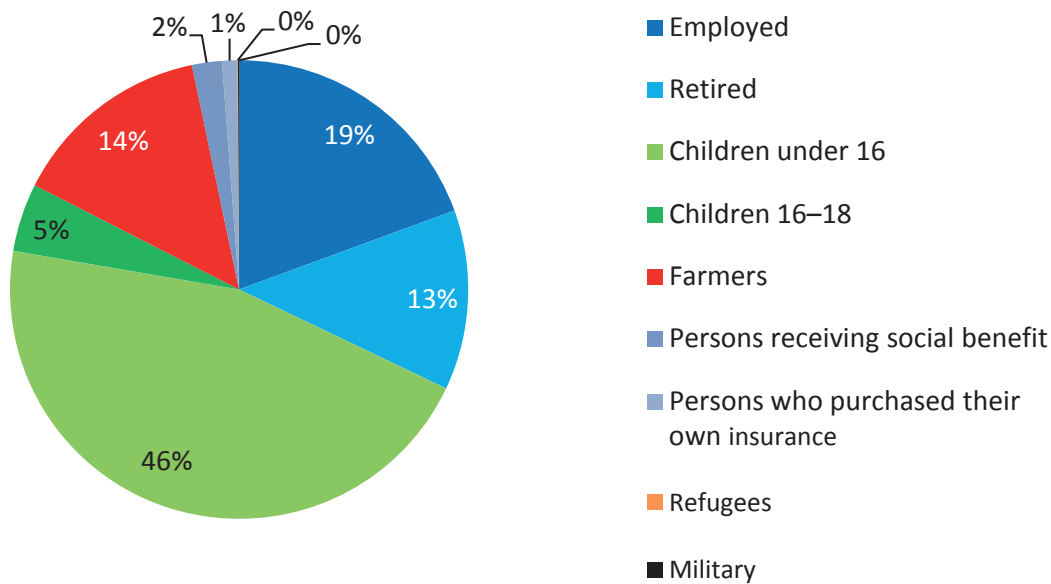
Figure 15. Multiple dimensions of health coverage in the Kyrgyz Republic compared to other regions (2011)



Source: World Social Protection Report 2014/15, 2014.

In the Kyrgyz Republic, the number of persons covered by health care insurance is growing for all groups of the population – 74.8 per cent of persons who used health care services were insured in 2015 (over 4 million persons). A positive trend is also seen in the number of persons who purchased their own insurance, from 13,600 persons in 2014 to 43,500 persons in 2015. Nevertheless, almost half of the insured population are children under 16 years old whose insurance is paid by the government. Just 19 per cent of those insured are employed (Figure 16).

Figure 16. Structure of insured persons with health care in the Kyrgyz Republic, 2015, per cent of the total number of insured



Source: Compulsory Medical Insurance Fund data, 2015.

As shown in Table 4, over the past five years there has been a decline in the share of population without access to health care services, according to the results of the household survey. Generally, throughout the Kyrgyz Republic, 1.2 per cent of the country's population had no access to health care services in 2014, while in 2010 it was 1.9 per cent. However, several regions have growing numbers of people with no health care access, including the Naryn (2.1 per cent in 2010 and 7.7 per cent in 2014) and Talas (0.5 per cent in 2010 and 1.2 per cent in 2014) regions. These numbers reflect the share of total population that faced financial, organisational or physical constraints in accessing healthcare services or facilities. The main reason that people do not take the advantage of services is their high cost, as well as long distances to the health care facilities in remote rural areas.

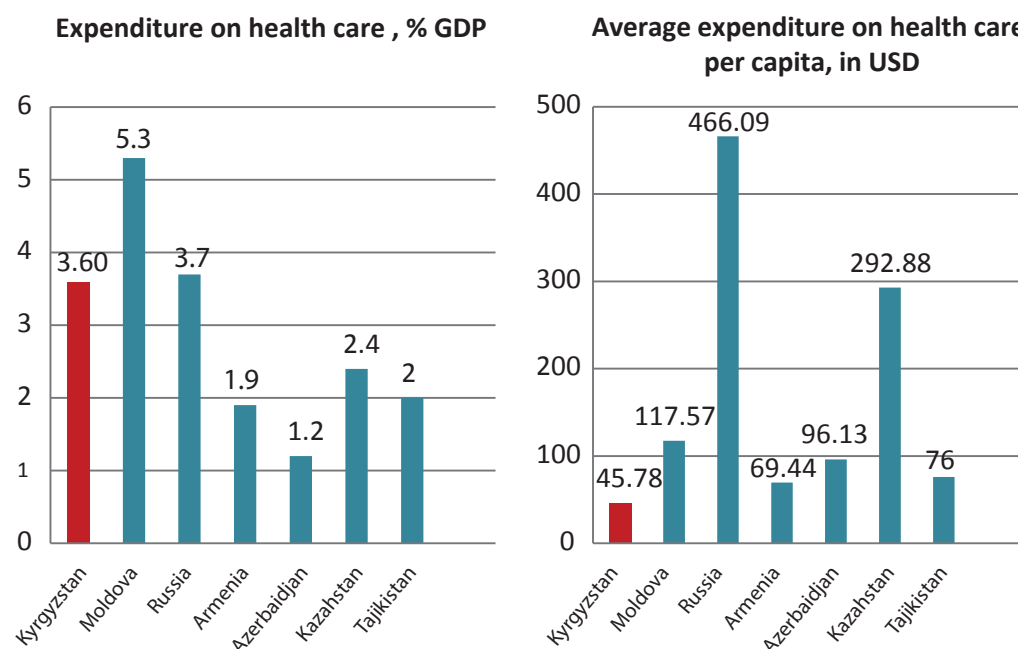
Table 4. Share of the population who does not have access to health care, % of the total population

	2010	2011	2012	2013	2014	Trend
Kyrgyz Republic	1.9	2.2	3.4	1.4	1.2	
Batken oblast	1.2	2.7	2.1	1.6	1.1	
Jalal-Abat oblast	2	1.3	5.6	1.4	1.1	
Yssyk-Kul oblast	1.4	1.9	6.2	0.9	1.2	
Naryn oblast	2.1	1	1.8	7	7.7	
Osh oblast (until 2013 including Osh city)	0.8	2.4	2.5	0.2	0.2	
Osh city	–	–	–	0.2	0.3	
Talas oblast	0.5	0.2	0.4	1.6	1.2	
Chui oblast	5.4	5.1	4.1	2.7	1.1	
Bishkek city	0.9	0.9	1.9	0.8	1.2	

Sources: NSC, KIHS.

In comparison with the other CIS countries, the Kyrgyz Republic shows a comparable similar level of expenditure on health care as a percentage of GDP but a very low level of government expenditure on health care per capita in US dollars (see Figure 17). In the Kyrgyz Republic, from 2005 to 2014, total health expenditure as a percentage of GDP increased from 5.8 to 6.5 per cent. The highest share of GDP for spending on health care was 7 per cent in the year 2012.

Figure 17. Government expenditure on health care: Comparison of the Kyrgyz Republic to countries in Eastern Europe and Central Asia, 2014



Source: World Bank data and World Health Organization data, 2014.

Available at <http://data.worldbank.org/indicator/SH.XPD.PUBL.ZS?locations=KG-MD-RU-AM-AZ-TJ-BY-KZ> and <http://apps.who.int/gho/data/view.main.HEALTHXPCAPTJK?lang=en>, last accessed 20 July 2016.

Regarding the government expenditure on health care, though it has been increasing in the nominal values, government expenditure on health care as percentage of GDP is decreasing from 2010 to 2014 (table 5).

Table 5. Government expenditure on health care

	2010	2011	2012	2013	2014	2015	2016*
Government expenditure on Health care (in KGS million)	6,910.8	9,458.9	1,1645.2	12,319.0	12,920.9	11,825.0	13,241.9
% to GDP	3.1	3.3	3.8	3.5	3.2	2.7	2.7
% of general government expenditure	10	10.3	10.9	11.8	10.7		

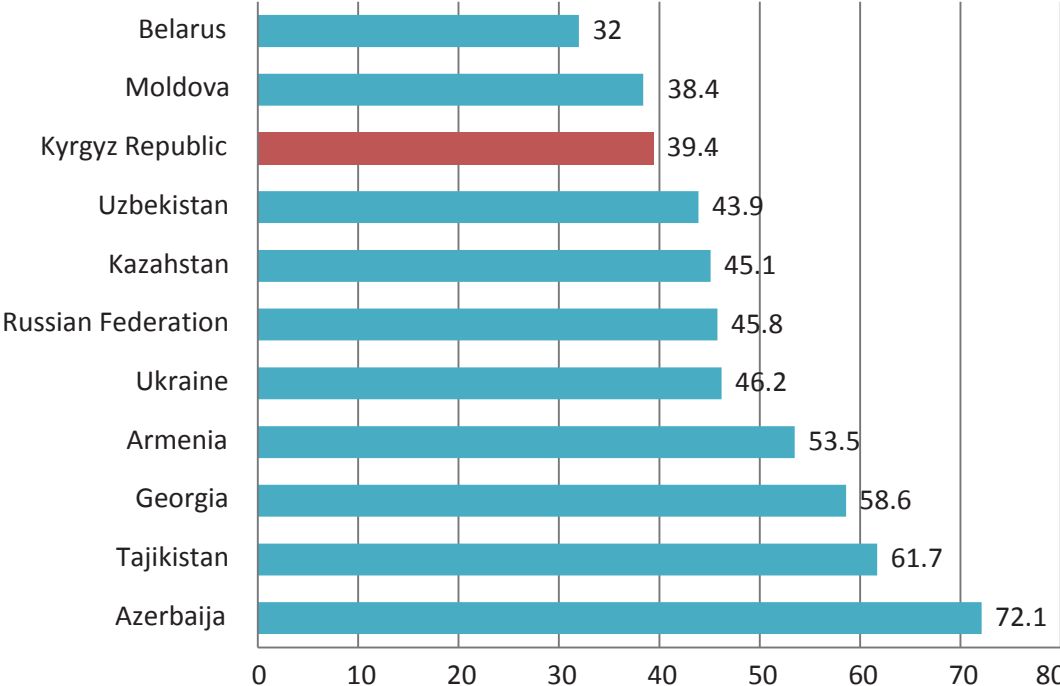
Sources: National Statistical Committee, 2010-2014; CHIF, 2015-2016 (government expenditure only); IMF, 2015-2016 (GDP only).

Note: Figure 17 and Table 5 show minor differentiation in expenditure on health care part in the Kyrgyz Republic for 2014. The authors of the report suppose, it is because of different sources of data: WB (3.6 per cent) and NSC (3.2 per cent).

* Preliminary data.

Although among neighbour countries, out-of pocket expenditure on health care is similar to the Kyrgyz Republic, the out-of pocket payments in the Kyrgyz Republic are twice as high (39.4 per cent) as Europe and Central Asia (17 per cent). Household spending on health care as a share of total spending increased in the past 5 years from 1.67 per cent in 2010 to 1.9 per cent in 2014 (NSC, Household Budget and Expenditure Survey) with a short period of decrease in 2011 and 2012.

Figure 18. Out of pocket payment as percentage of the total expenditure, 2014



Source: World Development Indicators (WDI) database.
 Available at: <http://data.worldbank.org/indicator/SH.XPD.OOPC.TO.ZS?locations=MD-KG-UA-RU-AZ-TJ-AM-GE-KZ-UZ-BY&view=chart>

In recent years, the number of family doctors decreased due to the re-organisation of medical centres as a cost savings measure for more rational use of financial resources. In medical centres, the number of doctors with a high-level degree decreased in the last 5 years, while the number of nurses and midwives increased from 54 to 57 per 10,000 persons. On average, in the Kyrgyz Republic the number of medical personnel, at 78.5 medical staff per 10,000 in 2014, is higher than the ILO threshold of 41.1 per 10,000. However, there are several regions that are below the ILO medical staff number threshold; among them are Jalal-Abad, Chui and Osh (Table 6).

Table 6. Medical personnel per 10,000 persons in the Kyrgyz Republic

	2012	2013	2014
Kyrgyz Republic	78.9	79.3	78.5
Batken oblast	142.4	142.4	141.3
Jalal-Abat oblast	32.9	33.2	32.5
Yssyk-Kul oblast	167.9	171.5	172.8
Naryn oblast	59.6	59.4	60.6
Osh oblast	42.3	42.2	42.0
Talas oblast	146.9	152.1	149.7
Chui oblast	31.1	31.9	31.6
Bishkek city	63.3	62.3	59.9
Osh city	26.7	27.2	28.5

Source: ILO calculations based on data from the NSC.

One reason for the lack of health care personnel is the low wage compared to average wages in other economic sectors. The wages for workers in health care and social work were on average 24.8 per cent lower than the average wage in the country in 2014. Additionally, the gap between the wages in health sector and the national average has increased; in 2012, the gap was only 11.7 per cent (ILO calculations based on NSC data, 2012).

The health care and health promotion strategy of the Kyrgyz Republic up to 2020 (hereinafter “Health – 2020”) aims at achieving the higher social, economic and governance levels necessary for effective prevention measures of different illnesses by improving the quality and accessibility of medical services. The strategy reflects three main objectives: (1) Ensuring the universal health care coverage; (2) Achieving the needs of different socially vulnerable groups (adolescents, older persons, persons with disabilities and others); (3) Involving other sectors (stakeholders) in public health care and promotion. The main areas reflected in the strategy for improving the health system are non-transmissible illnesses, maternal and child health, HIV and tuberculosis.

3.1.3 Policy gaps and obstacles for implementing health insurance schemes

This section reviews the policy gaps on health care related to the national SPF, as put forward by the SPF working group members during the ABND process.

Policy gaps

- Coverage (including target groups) ✓ Poor targeting of beneficiaries (errors of inclusion) under GHA;
✓ Low access of women and children to healthcare service on maternity protection under BPHIS;
✓ Low coverage level by CHI scheme.
- Service provision/benefit package ✓ Low quality of healthcare services under BPHIS;
✓ Minimum required health care services not secured under BPHIS and CHI.
- Financing mechanism ✓ Limited access to expensive specialized healthcare services (oncology, cardio surgery, haematology, psychiatry) for vulnerable groups under BPHIS;
✓ State budget deficit for running GHA;
✓ Policy gap for covering the costs of health care services to military staff and students: Lack of budget allocation for their medical services under GHA programme.

Obstacles for implementing the schemes

- Accessibility of services ✓ Limited geographical access of the population living in rural regions, to laboratory, diagnostic and healthcare services under GHA.
- Quality of services ✓ Low level of qualifications of healthcare personnel and lack of equipment under BPHIS;
✓ Laboratories with old-fashion or insufficient medical equipment;
✓ Lack of medical professionals in rural regions (eg. neuropathologists, cardiologists);
✓ Underdeveloped network of healthcare centres with good infrastructure;
✓ High turnover of medical professionals due to low wages.
- Governance ✓ Insufficient inter-governmental cooperation.
- Information & Awareness issues ✓ Poor information on or practice of a healthy lifestyle and lack of information on healthcare services to the population under BPHIS.

3.1.4. Conclusions and recommendations

This section provided a summary of existing health care schemes in the Kyrgyz Republic (BPHIS, CHI and VHI) and analysed the health care system from the different angles by using various statistics. In terms of health care coverage, national statistics show that 74.8 per

cent of persons who used health care services were insured by national health care schemes and only 1.2 per cent of the country's population had no access to health care services in 2014 due to financial, organisational, physical or geographical constraints throughout the Kyrgyz Republic. In this respect, it can be concluded that minimum required health care system is operating to cover most of the population in the Kyrgyz Republic. One concern to be mentioned is the access of vulnerable groups to health care service (including medicine) which was proposed as one of the priorities by two SPF-WG sub-groups during the second ABND. This problem is closely related to affordability and the minimum quality of health care service which will be touched upon in the following sections.

Taking into consideration that the BPHIS is the most comprehensive health insurance scheme which covers all Kyrgyz citizens regardless of employment status, the BPHIS plays the most critical role in guaranteeing the national SPF level to all population at the moment. This is mainly due to the considerable size of employment in the informal sector in the Kyrgyz Republic (72 per cent of the total population, 66 percent of the labour force and 41 per cent of the working age population in 2013, according to the NSC) where the possibility of extending health care coverage by CHI is still limited as CHI is mainly targeted to the formal sector workers. In this respect, improving the quality of health care services under BPHIS would be the most realistic option to guarantee and improve the national SPF on health care with a short and mid-term perspective.

Table 3 of Chapter 1 explains that approximately 40 per cent of contributors to CHI are voluntary-based, which are either self-employed or informal sector workers. In this respect, there is a strong need and potential to expand national health care coverage by CHI scheme. There are two dimensions to Increase the CHI contributors: formalization of informal employment and facilitation of the workers in the informal sector and self-employed to voluntarily join the CHI scheme.

Improvement of health care service is one of the priorities selected by two SPF-WG sub-groups during the second ABND (refer Chapter 2.3.2). Judging from the number of medical personnel per 10,000 persons, the country fulfils both WHO and ILO thresholds. In this respect, the concerns are more focused on the quality rather than the quantity of health care service providers. Here, the main question is how to define minimum quality of health care service which is very similar to the question of defining the SPF level of health care service in the Kyrgyz Republic. To answer this question, it is necessary to have more in-depth analysis of the health care services in the Kyrgyz Republic.

With respect to the affordability, out-of-pocket expenditure on health care is relatively lower in comparison with the other CIS countries whereas the actual amount of government expenditure on health care per capita is significantly low in the global comparison and the second lowest in the CIS region (refer Figures 15 and 17). It is important to mention that low government expenditure on health care affects the wage level of medical professionals. In order to retain good and motivated medical personnel, it is necessary to increase the national budget allocation for health care which will eventually improve the quality of health care service in the country.

In summary, the main challenges related to the SPF guarantee on health care are as follows:

- Lack of definition on minimum quality of health care service in accordance with the nationally defined SPF on health care;

- Strengthening BPHIS in order to increase the national SPF on health care;
- Low government expenditure on health care; and
- Further expansion of health care coverage by CHI scheme to facilitate the inclusion of informal sector workers and self-employed workers in the system.

Box no.3

Recommendations on health sector developed within ABND

During the entire process of ABND in the Kyrgyz Republic, the SPF-WG members discussed and reviewed the reviewed the present national social protection system to understand what elements of national SPFs are in place and where policy and implementation gaps exist in the national SPFs. Below are recommendations on health care raised by the SPF-WG members:

Recommendations for addressing policy gaps

- | | |
|-------|---|
| BPHIS | <ul style="list-style-type: none"> ✓ Increase specialized health services to vulnerable social groups (oncology, cardio surgery, haematology, psychiatry); ✓ Improvement in the quality of primary healthcare services including medicines (diagnostic aid, preventive care, drug treatment and emergency medical aid); ✓ Introduction of efficient technologies at the level of hospital treatment and emergency aid; ✓ Increase in the level of maternity protection. |
| GHA | <ul style="list-style-type: none"> ✓ Implementation of legal provisions with a secured budget or amendment of legislation in accordance with the actual health care practices under GHA. |
| CHI | <ul style="list-style-type: none"> ✓ Extension of CHI coverage to informal workers. |

Recommendations on improving implementation

- | | |
|-------|--|
| BPHIS | <ul style="list-style-type: none"> ✓ Improvement of the inter-agency cross-sector collaboration among public institutions; ✓ Development of information technologies and systems in the sphere of healthcare; ✓ Improvement in access to services for emergency and specialized medical aid; ✓ Improvement of the capacity of health care staff and employment conditions; ✓ Promotion of healthy lifestyles under BPHIS. |
| GHA | <ul style="list-style-type: none"> ✓ Development and improvement of public and private partnerships by amending the relevant legislation; ✓ Reallocation of state budget on health to improve health service efficiency; ✓ Improvement of human resource policy for health care workers with long-term planning. |
| VHI | <ul style="list-style-type: none"> ✓ Preparation of a strategy for establishing private health care centres with good infrastructure; ✓ Improvement in the regulatory framework for the VHI programme. |

3.2 Children

3.2.1 Present social protection system related to children

Article 5(b) of the ILO Recommendation concerning national floors of social protection Social Protection Floors Recommendation, 2012 (No.202) defines the SPF for children as: “Basic income security for children, at least at a nationally defined minimum level, providing access to nutrition, education, care and any other necessary goods and services”. In this respect, the SPF guarantee for children is not limited to cash benefits and social services but is extended to access to nutrition, education and care. Given the focus of this chapter, child health is also included in this section.

According to Article 45 of the Constitution of the Kyrgyz Republic (adopted in 2010), the educational rights for children have been set out as follows:

1. Everyone shall have the right to education.
2. General basic education shall be compulsory.
3. Everyone shall have the right to receive general basic and secondary basic education in state educational establishments free of charge.
4. The State shall create conditions for teaching everyone in the state the official language and one international language beginning from pre-school educational establishments through general basic education.
5. The State shall create conditions for the development of public, municipal and private educational establishments.
6. The State shall create conditions for the development of physical culture and sports.

The SPF guarantees for children under the Constitution are related to rights of educational access, whereas a more comprehensive set of SPF guarantees are covered under the Child Code No.100 promulgated in August 2012. The Child Code made important changes to the overall legal framework for children and laid the foundation for a comprehensive integrated response to children’s issues. The Code is a human-rights based legal framework and includes social protection clauses setting out children’s rights to health care, education, housing and other social services. The revisions to the Child Code were undertaken in line with international human rights standards, including the UN Convention on the Rights of Child.¹⁵ Child protection issues¹⁶ were integrated into the broader framework of Kyrgyzstan’s Social Protection System and mainstreamed into Social Protection Development Programmes operational over the period of 2012–2017.

¹⁵ The Kyrgyz Republic acceded to the UN Convention on the Rights of Child in October 1994. "Accession" is the act whereby a state accepts the offer or the opportunity to become a party to a treaty already negotiated and signed by other states. It has the same legal effect as ratification (United Nations Treaty Collection – Glossary, https://treaties.un.org/untc/Pages/Overview.aspx?path=overview/glossary/page1_en.xml).

¹⁶ The national child protection framework sets mechanisms within which a variety of partners can work together efficiently based on a coordinated multi-disciplinary and multi-sectoral approach to: (1) identify children living in difficult conditions (including child labourers); (2) make an overall assessment of children and families; (3) develop and realize a Child Protection Plan (including a referral system); and (4) monitor and track child protection from and prevention of difficult conditions to ensure that their situation has improved.

In this report, the SPF guarantees for children are divided into four categories, in accordance with the Social Protection Floors Recommendation, 2012 (No.202): cash benefits; nutrition; education; childcare and other services. The basic legislative norms for each category are set out below.

Cash benefits

- Law No.57 “On State social pension insurance” (1997);
- Law No.318 “On State benefits” (2009);
- Law No.170 “On guaranteed State minimum social standards” (2009);
- Statute No.822 “On the procedure for granting State benefits” (2009);
- Statute No.824 “On the procedure for calculating total family income for the provision of the monthly benefit to low income families with children”; (2009);
- Statute No.825 “On guaranteed minimum income” (2009); and
- Statute No.133 “The procedure for the calculation of standard income from allotments and farmlands” (2011).

Nutrition and child health

- Law No.112 “On medical insurance for citizens” (1999);
- Law No.6 “On health protection of the citizens” (2005);
- Statute No.7 “Cash nutrition standards in social institutions” (2008);
- Statute No.691 “On social standards with regard to the provision of social services to families and children, as well as to institutions providing social services to children with deprived backgrounds” (2012);
- Government Decree No.694 “On the adoption of a subsistence minimum structure for the main social and age groups in the Kyrgyz Republic” (2009); and
- Government Decree No.734 of the Prime Minister “On the policy for the national school meals programme and school feeding strategy” (2014).

Education

- Child Code No.100 (2012);
- Law No.92 “On education” (2003); and
- Government Decree No.201 “On strategic directions for the educational system in the Kyrgyz Republic, 2012-2020” (March 23, 2012).

Childcare and other services

- Child Code No.100 (2012);
- Family Code No.201 (2003); and
- Law No.111 (art.26) “On the basic principles of social services provision to the population” (2001).

3.2.2 Analysis of current social protection coverage for children

According to the ILO World Social Protection Report 2014/15, 0.33 per cent of GDP was allocated as public social protection expenditure for children in 2011 in the Kyrgyz Republic. This is slightly lower than the world average of 0.4 percent where there is a general tendency for most countries except Western Europe to allocate below one per cent of GDP for children.

Cash benefits for children

There are three types of cash benefits available for children at present (please see Annex 3.b for detailed information):

- (1) Monthly Benefits to Low Income Families with Children;
- (2) Monthly Social Benefits; and
- (3) State Social Survivors' Pensions.

The Monthly Benefit to Low Income Families with Children (MBLIF) is a non-contributory categorical and means-tested cash transfer to a family with children. The main purpose of MBLIF is to bring up per capita income of families with children to the level of the “Guaranteed Minimum Income (GMI)”.¹⁷ GMI was equal to almost one-quarter of the food part of the subsistence minimum for a child in 2015 (NSC, 2015). Families with children which have a per capita income below the GMI receive a flat rate of 705 KGS per month for each child under the age of 16 years and for students under the age of 18 years.¹⁸

The Monthly Social Benefit (MSB) is also a categorical cash transfer but for specific groups of children, such as children with disabilities and HIV/AIDS, children born of parents with HIV/AIDS, and children who are survivors/orphans (dependents of breadwinners) but are not eligible for the State Social Survivors' Pension. The amounts of the MSB vary from 1,000 KGS to 3,000 KGS per month as of May 2015.

The State Social Survivors' Pension (SSSP) is a part of State Social Pension Insurance and is a contribution-based scheme. SSSP is provided to the dependents of insured persons and most of SSSP beneficiaries are currently children. The amount of the benefit increases with the number of dependent children in the family.

Table 7. Number of beneficiaries (thousands) of cash benefits for children in the Kyrgyz Republic, 2012–2014

	2012	2013	2014
Monthly Benefit to Low-Income Families with Children (MBLIF)	344.0	336.0	310.0
Monthly Social Benefit for children born with HIV/AIDS and children with disabilities (MSB)	25.3	26.7	27.5
Monthly Social Survivor Benefit	13.9	14.5	15.2

Source: NSC (2012–2014).

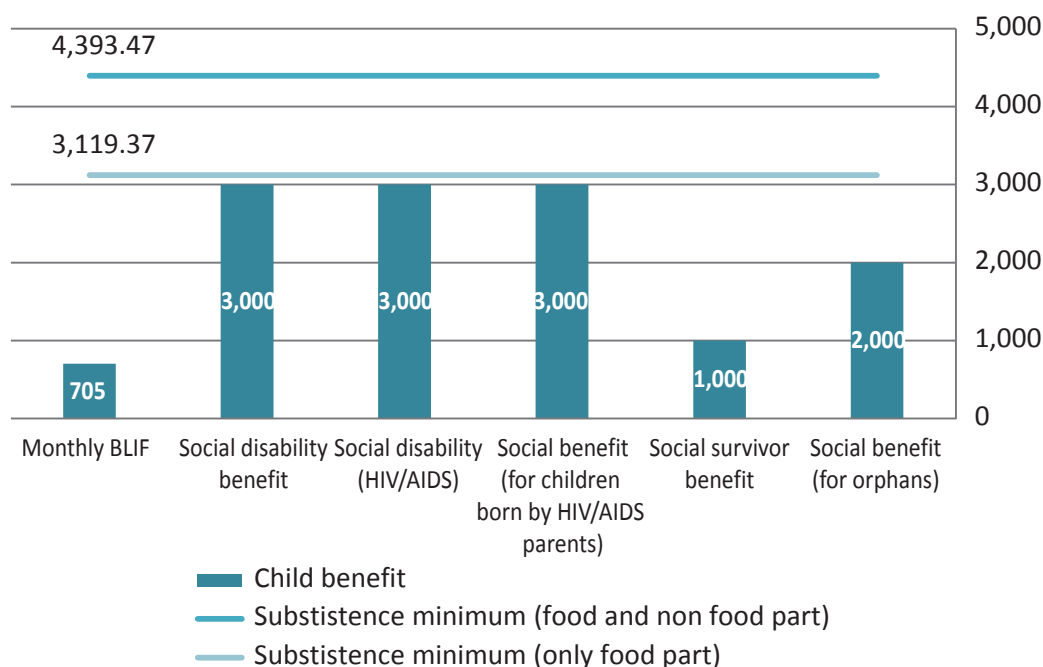
¹⁷ GMI per month is 810 KGS as of July 2015. Please refer Chapter 1.3.2 regarding the definition of GMI.

¹⁸ In cases of lump-sum payment upon childbirth, a fixed percentage of GMI as MBLIF is provided for twins below 3 years old, triplets and quadruplets below 16 years old.

Data from the NSC household survey showed that in 2014, 37.9 per cent of all children aged 0–17 were living in poverty with 1.7 per cent were in extreme poverty. The level of poverty in rural areas was 5.4 per cent points higher than in urban areas. Poverty rates are highest among the households with large numbers of children: 70.4 per cent of households with five or more children are living in poverty and the poverty rate becomes even higher, 85 per cent, for large families in urban areas (NSC, 2014).

To date, the benefit levels remain low and insufficient; none of the three categories of benefits have reached the amount required to meet the children subsistence minimum (4,393.47 KGS/month), or even the food part of the subsistence minimum (3,119.37 KGS per month). Among these benefits, the MBLIF offers the lowest benefit and this is the only benefit specifically targeted to the poorest children. The MBLIF must be increased by 2,413.37 KGS/month to meet the subsistence minimum food part and 3,688.47 KGS/month to achieve the total subsistence minimum. The Monthly Social Survivor Benefit is a similarly low amount (1,000 KGS), while other MSBs, such as disability benefits and social benefits for children living with HIV/AIDS are higher. Both disability benefit and social benefit for children living with HIV/AIDS would need to be increased by 119.37 KGS/month in order to achieve the subsistence minimum food part and 1,393.47 KGS/month to reach the total subsistence minimum.

Figure 19. Comparison of cash benefits for children to children’s subsistence minimums, 2015



Source: Figure was designed by the authors based on MLS (benefits amount) and NSC (Subsistence minimum) data.

Note: Lump sum BLIF (birth) is 300% of GMI which is paid in the event of a birth. Monthly BLIF amount cannot exceed 705 KGS.

According to analyses conducted by the World Bank, almost 50 per cent of MBLIF beneficiaries belonged to the poorest quintile in 2011. Twenty per cent of MSB beneficiaries were in the poorest quintile. In this respect, MBLIF with means tested beneficiary targeting methodology achieves better targeting accuracy compared to categorical programmes. However, the analysis suggests high exclusion error in MBLIF, with approximately 60 per cent of children in the poorest quintile not receiving the benefit (World Bank, 2014).

Nutrition

Apart from the child's subsistence minimum (CSM), there are cash-equivalent nutrition standards that are set for social institutions providing for foster children, orphans and students under guardianship (refer to Annex 4.b). As of January 2016, the national average CSM is set at 4,393.47 KGS per month (including food and non-food components) and the daily food allowance for children is set at 101.24 KGS per day.¹⁹ The amount of the CSM is differentiated by age group: 3,891.54 KGS per month for 0–7 year olds; 4,578.62 KGS for 7–14 year olds and 4,966.38 KGS for 14–17 year olds.

Child health

The Kyrgyz Republic is among the countries that have achieved the Millennium Development Goals in terms of reducing infant mortality. In 2015, the infant mortality rate was 18 per 1,000 live births, down from 20.2 in 2014 (see Table 8). Infant mortality is higher in urban areas; however this is due to higher recording rates in the cities. Generally, the recording of mortality cases occurs in the medical centres, however, in the rural areas many people give birth at home due a lack of medical centres and hospitals. As a result, people do not necessarily report the death of the infant, leaving gaps in registration.

Table 8. General trends of infant mortality rate and child mortality rate in the Kyrgyz Republic

	Infant mortality rate under 1-year old (per 1,000 live births)			Total number of deaths, children under 5
	Total	Urban	Rural	
2010	22.8	37.8	15.4	3809
2011	21.1	36.1	13.7	3633
2012	20.0	33.6	12.7	3591
2013	19.9	35.0	11.9	3605
2014	20.2	37.9	11.0	3720

Source: NSC (2010–2014).

¹⁹ In accordance with the Government Decree No.294 (2009), food component is set at 71 per cent of child's subsistence minimum. Based on this information, daily allowance for children is calculates as follows: $4,278/30 \text{ days} \times 0.71 = 101.24 \text{ KGS per day}$.

In regional comparisons, the infant mortality rate in the Kyrgyz Republic is one of the highest in the region, after Tajikistan and Azerbaijan. The mortality rate in Tajikistan is 39 per 1,000 live births and in Azerbaijan, 28 per 1,000 live births.²⁰

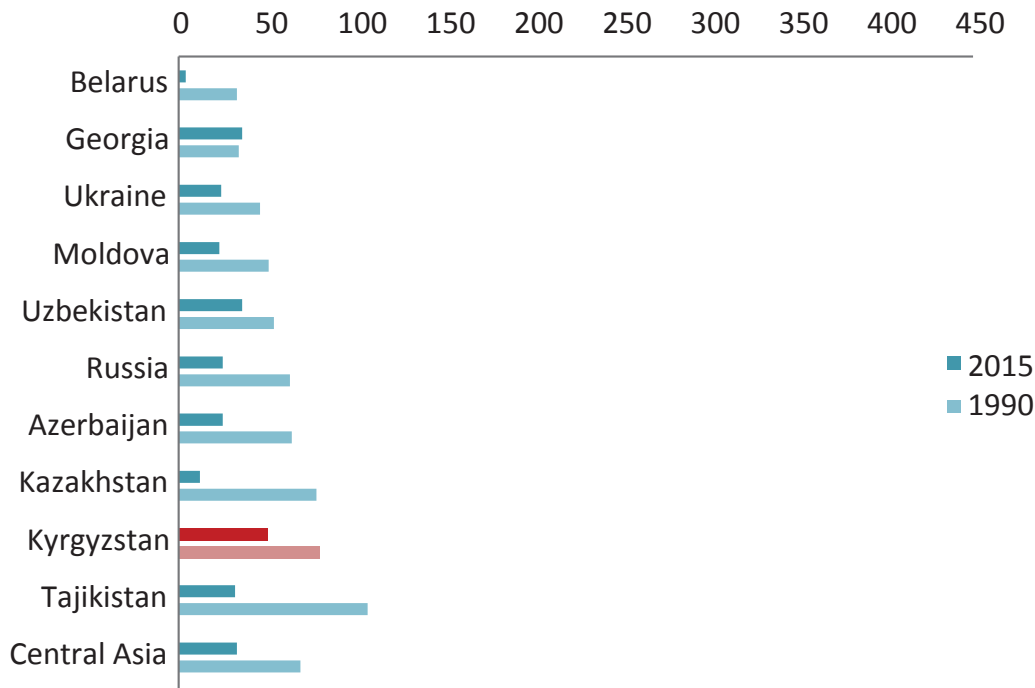
Table 9. Share of underweight children from ages 1 to 6 in the Kyrgyz Republic

	2000	2010	2011	2012	2013	2014
Kyrgyz Republic	6.6	7.4	6.9	7.2	8.7	7.4
girls	6.9	6.4	7.2	8.2	9.8	8.9
boys	6.3	8.3	6.7	6.3	7.7	6.0
Batken oblast	4.2	2.3	3.7	4.2	9.8	8.9
Jalal-Abat oblast	6.9	2.1	6.1	11.5	7.8	7.0
Issyk-Kul oblast	4.4	9.1	6.8	6.2	14.5	10.1
Naryn oblast	3.1	16.9	14.7	14.0	15.2	9.2
Osh oblast (until 2013 including Osh city)	5.2	12.1	5.5	7.1	5.2	3.3
Osh city	–	–	–	–	15.4	9.8
Talas oblast	4.0	10.1	4.1	1.6	2.0	2.8
Chui oblast	9.6	9.4	14.8	4.3	11.1	9.4
Bishkek - city	12.7	1.1	2.2	6.5	6.1	3.1

Source: NSC (2000–2014).

Although progress was made towards achieving the goal of reducing maternal mortality (from 80 cases per 100,000 births in 1990 to 50.1 cases in 2014), the Kyrgyz Republic still remains a country with one of the highest maternal mortality levels in the region (see Figure 20). A very high number of maternal mortality cases are observed in the rural areas – 56.4 per 100,000 births versus 37.9 cases in urban areas.

²⁰ The UN Inter-agency Group for Child Mortality Estimation consists of UNICEF, WHO, World Bank and UN DESA Population Division.

Figure 20. Maternal mortality ratio in the region and world (per 100,000 live births)

Source: WHO (1990 and 2015), NSC data for the Kyrgyz Republic (2014).

Note: Data from the NSC is from 2014.

Education

In the Kyrgyz Republic, education for children was among the most important priorities during the Soviet period and the legacy of this policy commitment is evident in the high literacy rate of 99.5 per cent in 2014 (NSC, 2014/15). The secondary school net attendance ratio is 93.3 per cent (Multiple Indicator Cluster Survey (MICS), 2014).²¹ With respect to higher education, women are more likely to enter higher education than men in the Kyrgyz Republic (134 females out of 1,000 compared to 113 males out of 1,000).

Compulsory education means that all children are entitled to receive basic schooling. In practice, however, many children drop out after a short period while others do not enrol at all. According to the MICS, in 2014, 6.6 per cent of school age children were out of school; of those, 38.7 per cent were girls (MICS, 2014).²² However, the number of children who did not attend school is decreasing. Primary school participation ratio was 96.05 per cent in 2008–2012, according to UNICEF statistics (source Education, UNICEF 2015).

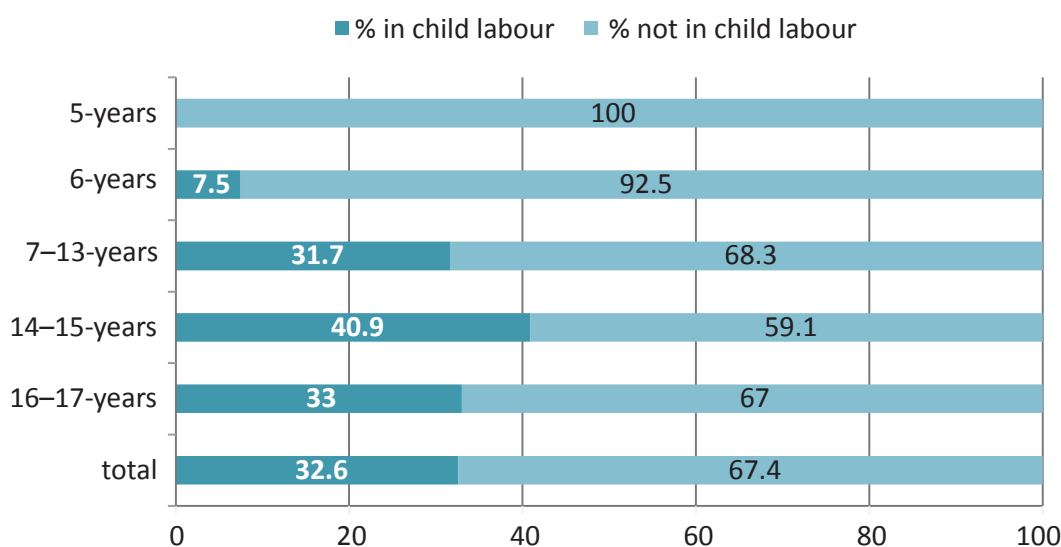
Child labour is a considerable problem in the country. Over a quarter, or 27.8 per cent, of children 5–17 years old (31.6 per cent of boys and 23.5 per cent of girls) were engaged

²¹ Percentage of children of secondary school age attending primary or secondary school or higher (adjusted net attendance ratio).

²² The percentage of children of secondary school age out of school are those who are not attending primary, secondary, or higher education.

in child labour activities and 32.6 per cent of those between first and eleventh grade combined schooling and child labour activities in 2014 (ILO, 2015). The majority of working schoolchildren are involved in labour that poses a threat to their health, schooling and development. One-fifth (21.8 per cent) is involved in hazardous work and one-tenth (10.8 per cent) in other forms of child labour, with only one out of ten (11.7 per cent) being engaged in legally permissible work.

Figure 21. Percentage of children between first and 11th grade combining schooling and child labour, by age groups



Source: UNICEF data.

Childcare and other services

In the area of childcare, the new Child Code No.100 (2012) creates strong “gatekeeping mechanisms” to prevent children from being separated from their families. The decision to place a child permanently in residential care must be made by a court and can be used only as a last resort (UNICEF, 2016). According to a WFP/ILO survey in 2014, childcare is traditionally done by family members such as parents (81.5 per cent), grandparents (10.7 per cent) and relatives (2.5 per cent). Four per cent of children stay at home alone in the country and this rate is higher in Bishkek at 12.3 per cent (WFP/ILO, 2014).

Childcare responsibilities are borne by close kin in large part because of the substantial lack of childcare facilities in the country. In the early 1990s, the Kyrgyz Republic had 1,696 day-care centres whereas by 2015, there were only 1,186 operating preschool facilities accommodating just 161,380 children or 0.1 per cent of all children in the eligible age range. Childcare facilities are available to 31.1 per cent of all children in urban areas and 14.2 per cent all children in rural areas in 2015 (MICS, 2015).

The coverage of children by preschool education in the Kyrgyz Republic remains very low. Only 23 per cent of children age 36 to 59 months are attending an organized early childhood education programme. Urban-rural and regional differentials are notable – the figure is as high as 40.5 per cent in urban areas, compared to 16.0 per cent in rural areas. No

gender differential exists, however, there are notable differentials by socioeconomic status; 50 per cent of children living in the richest households attend such programmes, while the figure drops to 11.7 per cent among children in the poorest households. The proportion of children attending early childhood education programmes at ages 36 to 47 months (19.2 per cent) is somewhat lower than the proportion of children at ages 48 to 59 months (26.4 per cent: MICS, 2014).

3.2.3 Policy gaps and obstacles for implementing social protection schemes for children

This section reviews the policy gaps on social protection for children in the present national SPF situation, as put forward by the SPF working group members during the ABND process.

Policy gaps

- | | |
|------------------------------------|---|
| Legal and policy framework | <ul style="list-style-type: none"> ✓ Lack of coordination between pension system and other social policies that survivor pension (contribution based) may become lower than MSB (non-contribution based); ✓ The respective functions and authority of the state and municipalities responsible for developing social services are not defined by law. |
| Service provision/ benefit package | <ul style="list-style-type: none"> ✓ Low benefit level of MBLIF leading to insufficient effects on poverty reduction for children (the average benefit contributes to just 12.5% of the subsistence minimum for children); ✓ Extremely limited free social services at the local level on a regular basis; ✓ Low qualifications of social workers and lack of advanced training systems for social workers and specialists working with children; ✓ Insufficient number of social workers at the local social security administrations (lack of pathologists, teachers, psychologists, in particular those working with disabled children). |
| Financing mechanism | <ul style="list-style-type: none"> ✓ Lack of systematic funding mechanisms to sustain free social services at the local level. |

Obstacles to implementing the schemes

- | | |
|---|--|
| Beneficiary targeting/ selection | <ul style="list-style-type: none"> ✓ Poor targeting of MBLIF beneficiaries. |
| Financial and administrative governance | <ul style="list-style-type: none"> ✓ Lack of MBLIF and other data linkages between state and municipal service provision. ✓ Authority of the Government and local self-government bodies in the sphere of socio-economic development of aimaks*/cities is not divided legally. |

* Aimak – main administrative-territorial unit of the third level of the administrative-territorial division of the republic.

Also, the responsibility of local self-government bodies and plenipotentiary representatives of the Government in matters of ensuring social protection of the population has not been established.

Awareness issues

✓ Low awareness about administrative procedures.

3.2.4 Conclusions and recommendations

This section provided a summary of existing social protection coverage for children in the Kyrgyz Republic and analysed the system from various angles. Children are legally protected by the Constitution, laws, and child and family codes, however, the level of actual SPF coverage for children is still insufficient.

In terms of child benefits, the most critical issue is the amount of the benefit. This problem was already identified by the SPF-WG members during the second ABND as one of the top priorities for urgent action. At present, the value of the benefit is not adequate to provide a minimum income guarantee for children as the benefit amount is even lower than the food subsistence minimum. The low benefit level of the MSB is also a main concern. Moreover, the lack of coordination between contribution-based social insurance and categorical social benefit schemes means that the amount of the MSB may become higher than the amount of the pension. In this respect, it is necessary to align social insurance and social benefit schemes to minimize disincentives for joining contribution-based social protection schemes.

Regarding the targeting of beneficiaries, MBLIF is considered to be one of the best targeted programmes for fighting against child poverty but given its high exclusion error, it needs to be further improved.

Another concern related to cash benefits for children is the use of multiple social indicators for determining the benefit level. At the moment, these include the subsistence minimum (which is equivalent to poverty line); the extreme poverty line which differs from the subsistence minimum by including the food component only; and the GMI. In particular, the GMI is an administrative social indicator used to adjust the benefit level depending on the availability of state budget funding but is not based on any scientific justification. In this respect, it is necessary to improve the application of social indicators in order to provide an adequate level of income guarantees to children based on SPF principles.

With respect to nutrition, there are several possible options for securing minimum nutrition requirements for all children in the Kyrgyz Republic. Apart from various cash benefits targeted to children, there is a national school meal programme for children. Considering the high levels of school attendance in the Kyrgyz Republic, this programme contributes to the minimum nutritional requirements for children. With respect to child health, the Kyrgyz Republic has achieved reductions in both infant and maternal mortality in recent years. Compared to other countries in the CIS region, however, infant mortality in the Kyrgyz Republic is still the second worst. As mentioned in the section 4.1 on health, improvements in quality medical services for children is important in guaranteeing the minimum SPF for child health.

Primary education is an area in which the Kyrgyz Republic has already achieved a reasonable SPF level. Basic primary educational opportunities are guaranteed in the country and the

literacy rate is high. However, child labour is still a considerable problem, with more than one fourth of 5–17 year olds are engaging into child labour activities in 2014. There is also a substantial lack of childcare facilities and social services for children in the country where children are not closely monitored and protected in a systematic manner.

Child-related social protection schemes are mostly non-contributory based and in this respect, increasing the state budget allocation would be the most efficient way to improve the national SPF level for children. Increasing cash benefits for children is essential, but also must be accompanied by improvements in the beneficiary targeting mechanism. In the case of in-kind benefits, improvements in facilities and services related to children (health, childcare, schooling and other services) are also required and the introduction of low, fee-based service options with subsidization can be considered as an alternative to direct cash transfers.

Box no.4

Recommendations on improving the social protection of children developed within ABND

Recommendations for addressing policy gaps

MBLIF	<ul style="list-style-type: none"> ✓ Increase the amount of the MBLIF at least to the food-subsistence minimum to provide food and nutrition guarantees to children, then, eventually to the subsistence minimum (including food and non-food); ✓ Develop additional instruments such as a productive safety net to complement the MBLIF, as a means to ensure a more progressive and sustainable approach to reducing chronic deprivation for children.
MSB	<ul style="list-style-type: none"> ✓ Harmonize social protection policies and social insurance policies.
State social survivors' pension	<ul style="list-style-type: none"> ✓ Align social insurance (such as survivors' pension) and social assistance systems to ensure that contribution-based benefits remain higher than non-contributory benefits.

Recommendations on improving implementation

MBLIF	<ul style="list-style-type: none"> ✓ Improve the targeting methodology of MBLIF; ✓ Improve the MBLIF scheme by automating the MBLIF provision system; ✓ Improve interagency cooperation and develop a one-stop shop to simplify administration; ✓ Improve the electronic database to facilitate interagency data exchange.
Free social services	<ul style="list-style-type: none"> ✓ Increase the qualification level of social workers and develop an advanced training system (including establishing a training facility infrastructure); ✓ Increase the number of social workers; ✓ Delegate the corresponding functions to the municipal authorities to develop social service programmes in the regions that take into account the specific needs of the population; ✓ Develop a sustainable funding mechanism to run social services at the local level; ✓ Review the work load of the social workers providing social services.

3.3 Working-age women and men

3.3.1 Present social protection system related to working age women and men

International practices of social protection for women and men of working age are usually divided into three main categories: (1) necessity to commute income lost for short or long periods as a result of sickness, employment injury, unemployment, maternity, disability; (2) necessity for additional measures where income is not enough to avoid poverty; and (3) necessity to regenerate working capacity (WSPR 2014/15).

According to article 5 (c) of the Social Protection Floors Recommendation, 2012 (No.202), the SPF for working-age people is defined as “basic income security, at least at a nationally defined minimum level, for persons in active age who are unable to earn sufficient income, in particular in case of sickness, unemployment, maternity and disability”. Thus, the recommendation covers various types of social contingencies when working age persons are unable to earn income. The four social contingencies, which occur during working-age period, are associated with incapacity to earn sufficient income.

According to the Article 53 of the Constitution of the Kyrgyz Republic (adopted in 2010), the social rights for all citizens have been set as follows:

1. All citizens have the right to social security in case of retirement, sickness, and loss of work capacity and or death of breadwinner.
2. Pensions and social assistance, based on economic development of the country, should guarantee such a living standard, which is not less than subsistence minimum.
3. Participation in voluntary social insurance schemes and creation of additional social security forms is encouraged.
4. Social activity of the state should not take the form of state guardianship and thus limiting economic freedom, activity and or opportunities of a citizen to achieve economic welfare for himself and his family.

This part mainly focuses on the income security for working-age persons, which is divided into the following benefits: sickness and employment injury benefits, unemployment benefits (including employment promotion), maternity benefits, disability benefits and survivor pension. The survivor pension is only partly described because the large majority of beneficiaries are children, so it is explained in more depth in the children portion of the chapter. The basic legal acts in each category are as follows:

Temporary disability (which includes sickness and employment injury):

- Labour Code No.106 (2004);
- Law No.194 “On compulsory insurance of employers’ liability in cases of occupational accidents and diseases” (2008);
- Law No.33 “On state guarantee and compensation for people living and working in high altitudes and remote inaccessible areas” (1996);
- Law No.20 “On state social insurance” (1996);
- Government Decree No.727 “On the procedure of granting, payment and amount of temporary disability benefit and maternity benefit” (2011);

- Government Decree No.152 “Instruction on temporary disability examination at healthcare institutions” (2012); and
- Resolution of the Jogorku Kenesh* No.1115-111 “On approval of basic rate” (2006).

Unemployment:

- Law No.214 “On promotion of employment” (2015);
- Statute No.707 “On the procedure and qualifying conditions of registration and payment of unemployment benefits and allowances to unemployed citizens during the period of professional training, retraining and professional development” (1998).

Maternity:

- Labour Code No.106 (2004);
- Law No.33 “On state guarantee and compensation for people living and working in high altitudes and remote inaccessible areas” (1996);
- Government Decree No.727 “On the procedure of granting, payment and amount of temporary disability benefit and maternity benefit” (2011); and
- Resolution of the Jogorku Kenesh No.1115-111”On the approval of basic rate” (2006).

Disability:

- Law No.57 “On state pension social insurance” (1997);
- Law No.111 “On the basic principles of social service provision to population” (2001);
- Law No.318 “On state benefits” (2009);
- Statute No.822 “On the procedure of granting of state benefits” (2009);
- Government Decree No.691 “On social standards with regards to provision of social services to families and children, as well as to institutions, providing social services to children with deprived background” (2012); and
- Government Decree No.7 “Cash nutrition standards in social institutions” (2008).

Others (for the survivors):

- Law No.57 “On state pension social insurance” (1997);
- Government Decree No.192 “On the amount of average monthly salary to calculate funeral grant” (2002); and
- Government Decree No.727 “On the procedure of granting, payment and amount of funeral grant” (2011).

3.3.2 Analysis of current social protection coverage for working-age women and men

A. Coverage: scope and extent

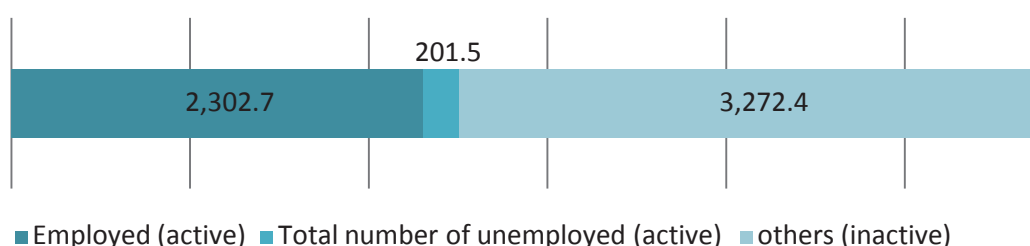
According to the NSC data, in 2014, the labour force²³ was composed of 2,504.2 thousand persons; of that 2,302.7 thousand persons were employed and 201.5 thousand persons were unemployed (Figure 22).

* Jogorku Kenesh – legislative body (parliament) of the Kyrgyz Republic.

²³ Economically active population within the labour market, including employed and unemployed persons seeking a job who are age 15 years and older. Economically inactive population could be students, pensioners, domestic workers and persons who are not seeking for a job (NSC, Social trends, edition no.11).

The labour force is composed of employed and unemployed persons seeking a job in the labour market who are 15 years or older. People not counted as part of the labour force can be: students, pensioners, domestic workers and persons who are not seeking for a job (NSC, Social trends, edition no.11). Women make up 41 per cent (1,037.0 thousand) of the labour force, while men make up 59 per cent (1,467.2 thousand). The number of officially unemployed workers²⁴ was 58.2 thousand persons, of which 52.07 per cent (30,330 persons) were women and 47.93 per cent (27,916 persons) were men.

Figure 22. Structure of economically active and inactive population in 2014, in thousand persons



Source: Figure was designed by the authors based on data of the NSC data and “Social trends for 2010–2014” edition no.11.

It is important to remember that most of the social security schemes for working persons in the Kyrgyz Republic cover only formal workers. This is troubling because the number of informal workers is very high in the country, which means there are a lot of people left without coverage.

In the “Employment in Kyrgyzstan 2014” publication (National Institute of Strategic Research of the Kyrgyz Republic (NISI)), informal workers are “groups of persons which consist of:

- self-employed persons without any patent or license;
- unregistered individual entrepreneurs with or without employees;
- no contract employed persons working in the enterprises of the informal sector;
- unpaid workers of the household enterprises; and
- employees of enterprises in the formal sector, working without a contract.”

At the same time, in accordance with the “Transition from the Informal to the Formal Economy” ILO Recommendation, 2015 (No.204), the term “informal economy”:

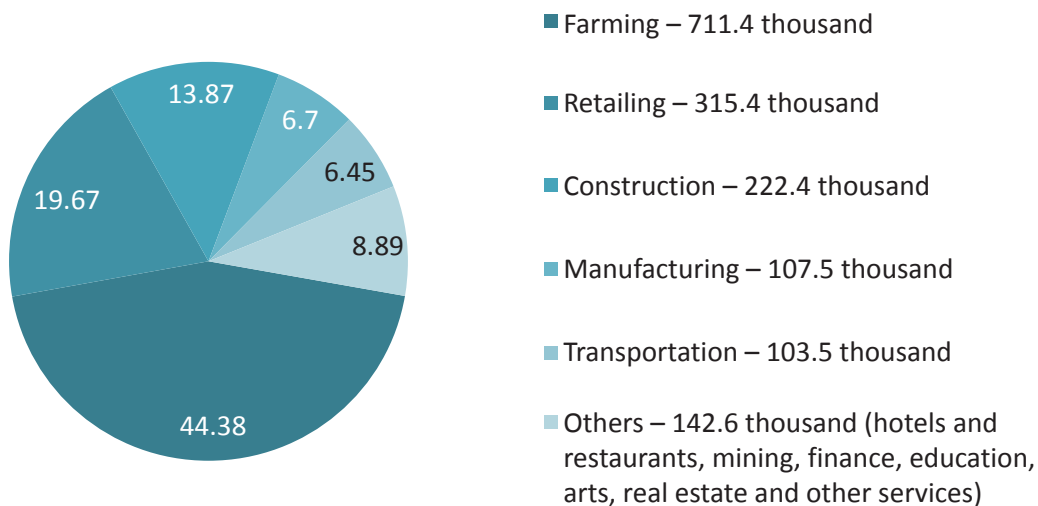
- a) refers to all economic activities by workers and economic units that are – in law or in practice – not covered or insufficiently covered by formal arrangements; and
- b) does not cover illicit activities, in particular the provision of services or the production, sale, possession or use of goods forbidden by law, including the illicit

²⁴ Officially unemployed persons – working age citizens registered with the state employment agency as persons having no job or income activity, similar to employment or earnings (income). They are also willing to find a suitable job and are ready to start working (law no.214 “on employment promotion” 2015).

production and trafficking of drugs, the illicit manufacturing of and trafficking in firearms, trafficking in persons, and money laundering, as defined in the relevant international treaties.

According to NISI data, in 2012, the number of informal workers was about 1.6 million, most of whom were working in farming (711 thousand persons), retailing (315 thousand persons), construction (222 thousand), manufacturing (107 thousand persons) and transportation (103 thousand persons).

Figure 23. Employed population in the informal sector, in per cent and thousand persons, 2012 (by economic sector)



Source: Publication on “Employment in Kyrgyzstan” 2014, National Institute of Strategic Research of the Kyrgyz Republic.

Temporary Disability Benefit (which includes sickness and employment injury benefits)

In the Kyrgyz Republic, legal coverage by employment injury and sickness schemes protect only those employed in the formal sector. At the same time, legal coverage does not necessarily transform into effective coverage. Measurement of effective coverage should reflect how in practice the legal coverage is implemented. Therefore, it is necessary to make a distinction between the number of social protection branches anchored in the legislation, the protected persons and or actual beneficiaries, and the level of benefits actually received by beneficiaries. Very often, the number of benefit recipients may be lower than those by legislation.

As mentioned above, about 222 thousand persons have been working as informal workers in the construction sector and 107 thousand persons have been working in the manufacturing sector. Taking into consideration that these two sectors are considered to be dangerous workplaces, all workers of these sectors (formal and informal) have a higher risk of being injured while on the job. Moreover, informal workers are not covered by the schemes currently offered and so are not protected at all in case of injury. These conditions lead to a much higher probability that informal workers will fall into the poverty gap. The farming sector is another area where suitable working conditions are lacking.

In accordance with the ILO Recommendation No.202, the social security extension strategy should apply to persons both in the formal and informal economy. The current large volume of informal economy constitutes a challenge for the extension strategy of social security in the Kyrgyz Republic.

Unemployment

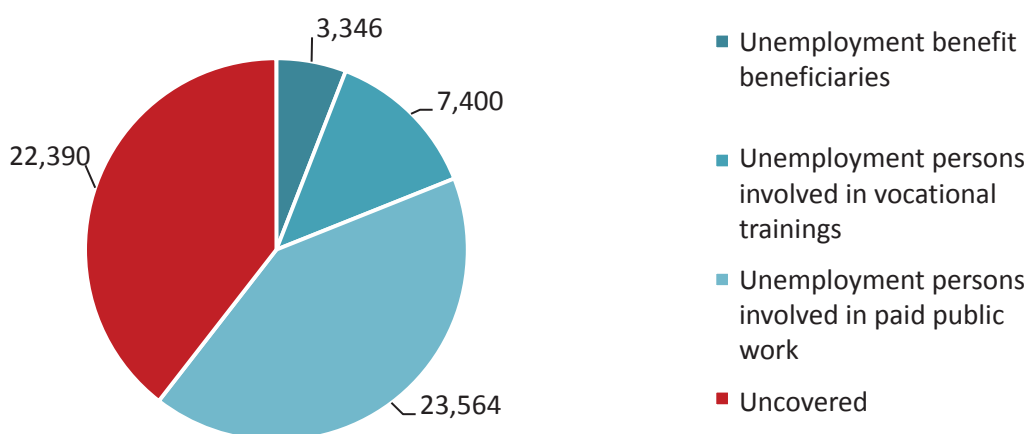
As in many other countries, in the Kyrgyz Republic, unemployment benefits are interlinked with the employment promotion services that support jobseekers in finding new jobs and in helping them update or obtain new occupational skills.

In 2015 in the Kyrgyz Republic, the number of registered unemployed workers was 56,7 thousand persons. In the same year, the total number of beneficiaries of employment seeking services and unemployment benefits was 34,079 persons. Of that number, 3,346 persons received unemployment benefits, 7,400 persons were involved in vocational education and 23,564 persons were employed by public works (MLSD, 2016).

Under the existing national legislation only 5.9 per cent (3,346 persons) of the registered unemployed persons receive unemployment benefits nationwide.

Figure 24 shows that the employment policy of the Kyrgyz Republic is mainly focused on employment guarantee measures, which secure unemployed persons with public paid works. Due to the fact that only a small number of registered unemployed receive the benefit, and the amount of it is not sufficient for decent living, only around 25 per cent of all unemployed people register their status.

Figure 24. Coverage of registered unemployed persons



Source: Figure was designed by authors based on data of the Ministry of Labour and Social Development, 2015 (former Ministry of Labour, Migration and Youth).

It is worth noting that in the Kyrgyz Republic, like in many other countries, only a small minority of unemployed workers receives any kind of cash unemployment benefits: 7.2 per cent of unemployed in Asia and the Pacific, 4.6 per cent in Latin America and the Caribbean, and less than 3 per cent in Africa (WSPR, 2014/15).

Maternity

It should be noted that the maternity benefit, like many other cash transfers in the country, only covers formally employed women workers. These can be externally employed, self-employed and farmers in the formal sector. The benefit also entitles officially registered unemployed women to maternity benefits during maternity leave. According to the NSC, in 2014 there were 30.3 thousand women registered as unemployed that had right to the maternity benefit.

Special attention is given to the residents of mountainous areas, as all the country's territory is 401 m above the sea level, more than a half of the territory is between 1,000 m and 3,000 m, and about one third – 3,000 m above the sea level. The mountainous area makes up quite large part of the country's territory.

The labour code entitles women, working in mountainous areas, to higher protection – namely, their maternity leave is two weeks²⁵ longer and they receive their maternity benefit payment at full salary, independently of their work record.

Taking into account that the Kyrgyz Republic has a large informal economy, particularly in the service and agricultural sectors that make up between 39 to 42 per cent of all economic activities; relatively low number of women workers are qualified to receive maternity benefits.

According to NISI data from 2012, the total number of informal workers equals 1.6 million persons in the Kyrgyz Republic. Of that, 935.4 thousand are men; 594.4 thousand are employed women the informal sector. Most of the women were self-employed in the agriculture, retailing and services sectors. All those women who are working in informal economy still are not protected against loss of income in the event of maternity.

Permanent disability

Based on the national legislation, all nationals living with disabilities are entitled to receive disability benefits or pension. Namely, according to The Law "on State Pension Social Insurance" insured nationals insured foreign citizens and people without citizenship residing in the Kyrgyz Republic are entitled to receive State Pension Social Insurance. It becomes clear that all persons living with disabilities are covered either by MSB scheme or by SPSI scheme. And according to the law "On State Benefits" disabled citizens without the right to pension security, and ethnical Kyrgyz, who came back to the Kyrgyz Republic and obtained "kayrilman"* status are entitled to receive the Monthly Social Benefit.

From 1996 up until the present, the number of disability pensioners has increased by more than two times and amounted to 102.8 thousand persons in 2014. Only during the period 2010–2012 were assigned 13.8 thousand disability pensions or 3 times more than in 1996 (4.6 thousand), and 2.5 times more than in 2000 (5.52 thousand). During this period, pension disability share was 17.7 per cent of the total number of pensioners compared to 9 per cent in 1996 (Kyrgyz Pension Concept 2015–2017).

* Ethnical kyrgyzes, who came back to the Kyrgyzstan and obtained "kayrilman" status.

²⁵ Normal delivery – 20 weeks (10 weeks after confinement); in case of two or more children delivery, not depending on actual duration of leave before delivery – 26 weeks (16 weeks after delivery).

In 2014, according to the Kyrgyz Social Protection Development Programme for 2015–2017, persons (including children share – 17.1 per cent) with disabilities were 155.9 thousand or 2.7 per cent of the total population. Around 129.24 thousand persons with disabilities were of working age.

On January 1st, 2014, the total number of pensioners receiving disability pension (contributory) was 102.8 thousand persons (Kyrgyz Pension Concept 2015–2017). At the end of 2014, the number of beneficiaries receiving disability benefit (non-contributory) was 32.9 thousand persons (KSPDP).²⁶ The Kyrgyz Republic covers all persons with disabilities by cash transfers, whether it is a pension or benefit. In this respect, the more significant issue that needs to be addressed is the amount of the disability pension or benefit paid to the beneficiaries (see 3.3.2.B. Adequacy of cash benefits for working age women and men).

It is less likely that a person with disabilities will be employed in the formal sector, which means that they are more likely to work informally or be unemployed leading to severe poverty (OHCHR, 2012; UN, 2013a; ILO, 2013d).

Other: survivor

As already mentioned earlier, in the Kyrgyz Republic there are two kinds of survivor benefit schemes: Monthly Social Benefit and State Social Survivor Pension Insurance. Based on legislation, the first one covers only children under 18 years old and full-time students up to 23 years old, while the second one covers children, and persons of working age who are unable to work, such as a parents, husband or wife of a deceased worker.

The beneficiaries of the second scheme are entitled to its benefits, in the event of the death of the breadwinner, if they are a dependent and are incapacitated to work. The deceased breadwinner has to have accumulated 1 year of working experience if they were up to 23 years old, 2 years if they were between 23 and 26 years old; 3 years if they were between 26 and 31 years old; 5 years if they were 31 years old and older. It is very important to highlight, that “de facto” most of the beneficiaries of survivor pensions are children. According to the Programme 2015–2017 and Pension Concept 47.2 thousand children received the Survivor Pension, and 14.5 thousand children received the Monthly Social Survivor Benefit.

B. Adequacy of cash benefits for working age women and men

The specific feature regarding disability-related cash benefits in the Kyrgyz Republic is that the types of disability benefits are divided by duration of benefit provisions: temporary and permanent, and divided by injury level: partial and total. Sickness and temporal disabilities (regardless of the causes of disability) fall under the category of temporary disability benefits, which are all financed through direct payments by the employers. Therefore, temporal (time-bound) employment injuries are covered by this scheme. In the case of permanent disability, a monthly social benefit is provided to those who are disabled from childhood, whereas those who have some working experience in the formal sector are to be covered by the state social disability pension insurance. For example, insured workers who had an employment injury are eligible to receive state social disability pension as long as the insured persons fulfil the condition of required qualifying period.

²⁶ Due to existing differences of available dates on data (beginning and ending of the year), here it is an error ratio for around 4 per cent.

Temporary Disability Benefit (TDB): sickness or employment injury

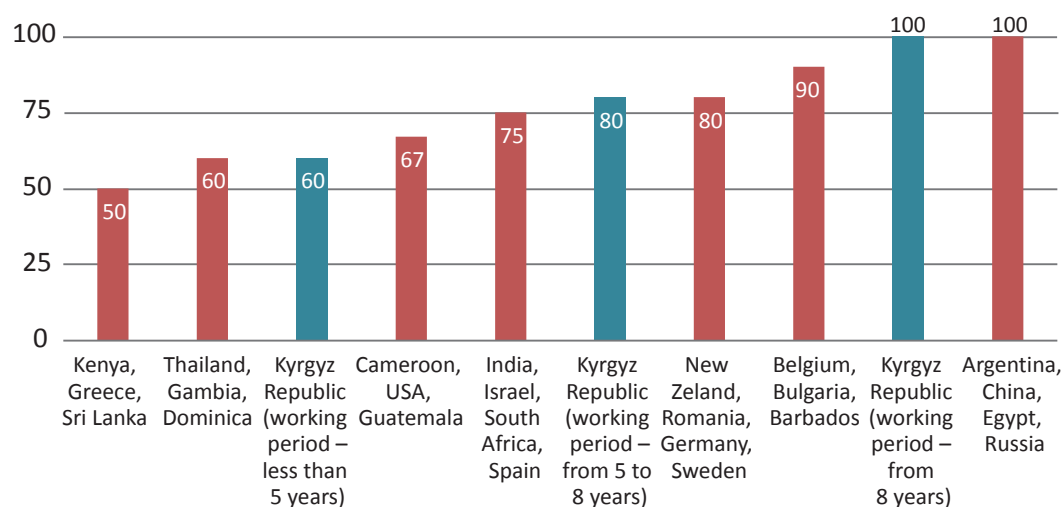
In 2008, based on the law “the employer’s liability on compulsory insurance in case of employment injuries and occupational disease within performance of labour (official) duties”, employer’s liability towards employment injury and occupational diseases has been reintroduced in the Kyrgyz Republic, whereas the majority of countries worldwide have implemented a social insurance approach.

The employer is also responsible for proper working conditions, which secure the occupational safety and health (OSH) of workers. In the occurrence of injury or occupational hazards the employer should guarantee equitable cash benefits and access to health care. Cash transfers, in the event of employment injury resulting in permanent disability, are provided in the form of pensions (see below Disability).

As mentioned previously, the amount of the TDB is maximum 100 per cent of wages and minimum 60 per cent and from the eleventh working day 50 basic rates.²⁷ In the end, the benefit amount is set depending on the total working period accumulated by the individual. Individuals with a working period of less than 5 years receive 60 per cent of their monthly wage, workers with a working period between 5 to 8 years – 80 per cent, workers with 8 or more years – 100 per cent, and from the 11th working day – in the amount of 50 basic rates. Thus, the benefit level from the legal coverage point of view may be considered as basic, or even higher than international stated benchmark due to replacement rate.

Employment injury schemes vary widely worldwide, the percentage of disability income provided in the Kyrgyz Republic is comparable to other countries from around the world (see Figure 25).

Figure 25. Employment injury protection: replacement rates for temporary disability, in per cent



Source: WSPR 14/15.

Note: From the 11th working day the benefit is paid in the amount of 50 basic rates.

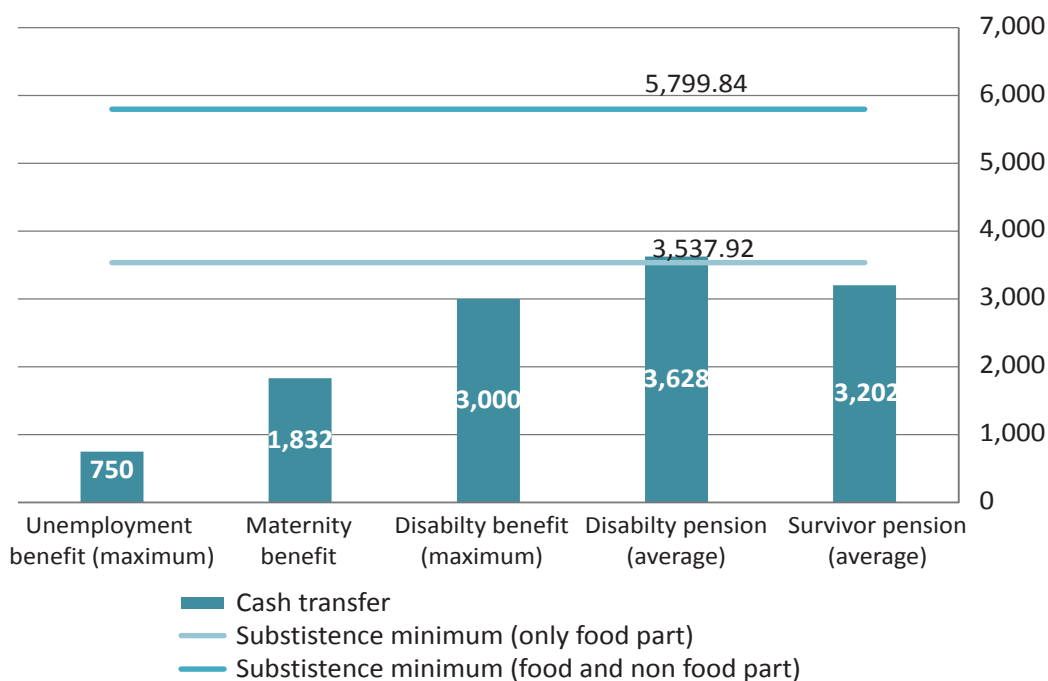
²⁷ Basic rate is equal to 100 KGS.

Unemployment

The unemployment benefit is a non-contributory scheme, which is referred to as assistance to unemployed persons, and is fully funded through state budget resources. To become a beneficiary of the benefit it is necessary to have a minimum required working period of 12 months. In 2015, the unemployment benefit amount was 250 KGS, 500 KGS and 750 KGS; this amount depends on the number of working years accumulated by the individual while they were in the official sector, before registering for unemployment.

These are very low amounts when even compared to the food part of the subsistence minimum. The benefit is provided once a month for up to 6 calendar months in one year, but not more than a total of 12 months over a three-year period.

Figure 26. Comparison of cash benefits for working age women and men and other social indicators, 2015



Source: Figure was designed by the authors based on data provided by MLS D (Unemployment, disability and survivor benefits), MLS D (Maternity benefit), SF (pensions) and NSC (subsistence minimum).

Notes: (1) Most of beneficiaries of survivor pension are children;

(2) In 2015, subsistence minimum for an adult person (working age) was 5,799.84 KGS. Subsistence minimum for adult men was 5,931.86 KGS and for adult women was 5,744.06 KGS. Average salary was 13,267.70 KGS (2015, source NSC).

Maternity

Generally, Maternity protection includes protection against suspension or loss of income during maternity leave as well as maternal health care. This reports main focus is on cash benefits, which ensure protection for women in case of suspension or loss of income.

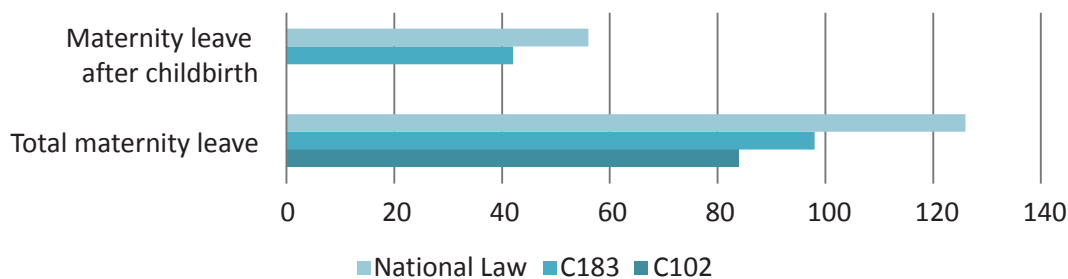
The adequacy of maternity protection can be assessed in terms of the length of maternity leave and the amount of maternity benefit. The Maternity Protection Convention No.183 requires a minimum of 14 weeks of total maternity leave, where a period of 6 weeks'

compulsory leave after childbirth is included. Based on the national legislation a high level of maternity leave period is currently granted. The length of maternity leave anchored in article 307 of the Labour Code of the Kyrgyz Republic is set for 126 days (18 weeks), of which 56 days (8 weeks) must be granted after childbirth. Women working in mountainous and remote areas have a longer maternity leave consisting of 140 days (20 weeks). In 2014, women received on average around 1,832 KGS per month during maternity leave (MLSD, 2015) what is below minimum required.

It is important to highlight, that National standards concerning length are much higher than it is required by Social Security (minimum standards) Convention No.102 and benefit level are much lower than subsistence minimum.

The lack of income during maternity, especially during the last weeks of pregnancy and first weeks after childbirth, pushes women to return to work earlier than necessary, which is very stressful for both woman and child. This is why maternity leave and cash benefits play such an important role in the prosperity of pregnant women, new mothers and their babies.

Figure 27. Comparison of length of maternity leave: International (C183) and National standards (Kyrgyz legislation)



Source: Figure was designed by the authors based clauses of the Maternity Protection Convention, No.183 (2000) and Labour Code of the Kyrgyz Republic No.106 (2004).

Disability

In 2014, in the Kyrgyz Republic there were about 155.9 thousand persons living with disabilities, or 2.7 per cent of the total population. Of which working persons made up 82.9 per cent (129.25 thousand), who may face various types of disadvantages than others people living without disabilities, for example in obtaining job that matches their skills and work experience. This is just first problem which may occur in life of the persons living with disabilities. It may become much worse, if the social protection is not guaranteed based on disability person needs, as an example is providing of the inadequate cash benefit or lack of proper health care.

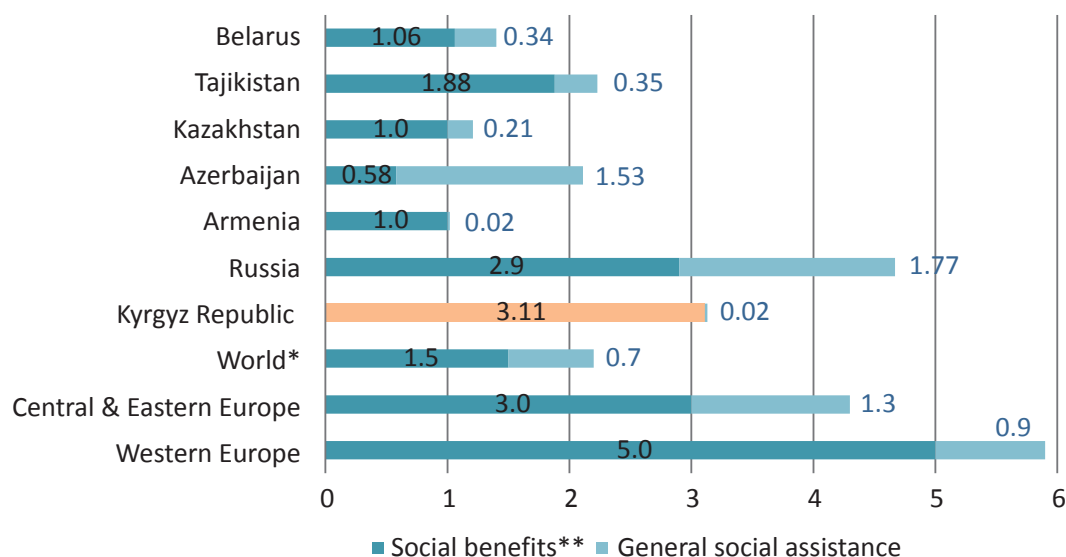
There are two kinds of cash benefits in the Kyrgyz Republic for persons living with disabilities, these are the Monthly Social Benefit and the State Social Disability Pension. The Monthly Social Benefit is a non-contributory benefit and non-means tested, while the State Social Disability Pension is contributory cash benefit. In the Kyrgyz Republic, as in many other countries, disability benefits are provided together with other supporting payments and subsidies. At the national level, social care institutions provide cash nutrition standards and free social services, which increase the opportunities for decent life.

In 2014, the average amount of disability pension disbursed was 3,628 KGS per person (2015, Social Fund). The maximum amount of disability benefit is 3,000 KGS per month. If an individual is disabled since childhood, depending on which group they are categorized as, groups I, II or III of disability;²⁸ and they do not have the right to pension security, they shall receive 3,000 KGS, 2,500 KGS or 2,000 KGS accordingly. Persons disabled from disease who are categorized in groups I, II or III of disability, without the right to state social pension insurance, shall receive 2,000 KGS, 1,500 KGS and 1,000 KGS accordingly (MLSD, 2015).

C. Financial sustainability and affordability of social protection system: taxpayers, contributors and fiscal space

According to WSPR 2014/15 statistics, public expenditure on social protection for persons of active age as a percentage of GDP consist of the following three categories of expenditure: (1) unemployment; (2) labour market programme and (3) sickness, maternity, employment injury and disability. Also according to the same source, governments in the world spent around 2.2 per cent of GDP on public social protection for the working age population (social benefits – 1.5 per cent and general social assistance – 0.7 per cent). This percentage level varies widely from region to region, and from country to country (see figure 28). For example in the Kyrgyz Republic 3.11 per cent of GDP was allocated towards public social protection expenditure for persons of active age (working-age population).

Figure 28. Regional comparison of public expenditure on social protection for persons of active age, in percentage of GDP, 2009–2012



Source: WSPR 2015/16.

Note: * As for the global average of social benefits for persons of active age, the years of latest available data by countries vary from 2003 to 2011.

** Social benefits consists of unemployment benefit, labour market programmes and sickness, maternity, employment injury and disability benefits.

²⁸ Disability group is level of disablement: First group is highest level of disablement; and third group is lowest level of disablement.

In the regional comparison within the CIS region, the Kyrgyz Republic has the highest level of spending, and when compared to the global average, it is even higher.

The distinctive characteristic of the Kyrgyz Republic expenditures consist on them allocating most of their money, 3.11 per cent out of 3.13 per cent as a percentage of GDP (WSPR 2014/15), on social protection for working age persons; focusing on sickness, maternity, employment injury and disability benefits. Whereas the public expenditure on employment for both passive and active labour market programmes is very limited in the Kyrgyz Republic.

The recent good practices of low-income countries suggest favourable prospects in the extending Social Protection Floors to all in short-to-medium term if the political space for adequate reforms exists. Some selected low-income countries showed good examples on recent extension of social protection. Some of them are Bangladesh (Maternity protection extension), Mozambique, Nepal, Niger (Child and family benefits extension), Cambodia and Rwanda (health coverage expanded).

Most recent studies conclude that the current system of the Kyrgyz Republic faces financial challenges. The level of the public pension spending is already very high relative to GDP and its fiscal pressure will continue to grow as the population ages (WB 2014, Kyrgyz Republic). It means that increasing the old-age pension would be difficult for the Kyrgyz Republic to finance. While universal maternity benefit with the higher level is more affordable, because of the much smaller number of beneficiaries and short – term nature of the benefit.

3.3.3 Policy gaps and obstacles for implementing social protection schemes for working age women and men

Policy gaps

Legal/ policy framework	<ul style="list-style-type: none"> ✓ Comment from NGOs/ILO: Pregnancy and childbirth attributed to variety of temporary disability, i.e. the category of diseases that are the basis for the appointment and payment of the relevant benefits. However, pregnancy is not a disease, it is a female reproductive function.
Coverage/ Target groups	<ul style="list-style-type: none"> ✓ The temporary disability benefit (sickness and employment injury benefit) does not cover people working in the informal economy (For example, individuals employed by NGOs, commercial organizations). In 2012, 52% of salaries in commercial organizations were paid with the false tax claims and social security contributions; 39–42% of economy was in the informal sector). ✓ Maternity benefit: workers in the informal economy, full-time university students, seasonal workers are not covered by the scheme. ✓ Unemployment benefit: Low coverage of unemployed persons by the scheme (low number of beneficiaries of scheme).
Service provision/ benefit package	<ul style="list-style-type: none"> ✓ Maternity benefit: Insufficient level of provision to women living in valley areas. The amounts of benefit differ greatly for those, who are living in high mountainous regions, and those, who are living in the valley areas. ✓ Funeral grant: low amount of benefit. ✓ Low amount of unemployment benefit. ✓ Regarding the MSB: the amounts of monthly social benefit paid to disabled persons may exceed the amounts of pensions paid to the disabled persons.

Obstacles in implementing social protection schemes

Quality of services	<ul style="list-style-type: none"> ✓ Free Social Services: Staff shortage and high staff turnover due to low salaries of social workers, which provide social services, particular to disabled individuals.
Financial and administrative Governance (incl. M&E)	<ul style="list-style-type: none"> ✓ Regarding the temporary disability benefit (sickness and employment injury benefit), a number of employers do not register all employees, thus avoiding the responsibility to pay the benefit

- upon the occurrence of corresponding social risk (sickness).
 - ✓ Free Social Services: Failure to analyse and monitor social services rendered to the population.
 - ✓ Free Social Services: Administrative shortages – Lack of services registry for the disabled persons.
- Information & Awareness issues
 - ✓ Regarding the unemployment benefit there is a low level of awareness among people of working age, especially among those, who are working in private organizations and engaged in the informal sector.
 - ✓ There is a low level of awareness among the population with regards to the right to a disability pension insurance, which is the State Social (permanent) Disability Pension Insurance.

3.3.4 Conclusions and recommendations

Social protection should be universal, based on social solidarity, social inclusion, including of persons in the informal economy. At the same time, national social security extending strategy should be based on the availability of national resources, gender equality, social adequacy, financial and fiscal affordability and good governance.

Taking into consideration existing environments in the Kyrgyz Republic, it is a big challenge to extend SPF at the national level taking into consideration both coverage and affordability, i.e. large uncovered informal sector and budget burden. In any case, in order to extend SPF for most vulnerable groups of populations and mitigate budget burden, one of significant measure could be extending the scope of social insurance coverage to uncovered categories of workers such as domestic workers, rural workers and others, i.e. to cover those who are still working in informal economy.

As recommend in the ILO Recommendation No.202 the National social protection extension strategy should apply to persons both in the formal and informal sector and support the growth of formal employment and reduction of informality. In any case, firstly an extension strategy should ensure support for most disadvantaged groups and people with special needs (ILO Recommendation No.202).

As mentioned above the employment injury and sickness directly interacts with health care coverage. Nevertheless, the health care for injured persons as result of the employment injury or occupational disease may differ from general health care applied for common sicknesses, i.e. in the first case, the medical staff may need a special qualification for caring the injured persons.

Though the unemployment benefit scheme has a very limited coverage in the Kyrgyz Republic, it is worth noting that there are countries where there are no unemployment benefit schemes in place. With that said, the amounts awarded by the unemployment schemes, are much lower than the subsistence minimum of the working person (750 KGS against 5,799.84 KGS). But at the same time, the government offers different programmes that support re-entry into the workforce, vocational trainings and public paid works.

Despite this, in the country there are about 22 thousand officially unemployed persons, which are not covered by any public unemployment schemes or programmes, whether it is the unemployment benefit or unemployment programme that supports persons seeking for a new job or vocational trainings to upgrade their professional skills.

The Kyrgyz Republic guarantees maternity leave before and after delivery to all women whether they are employed, self-employed or farmers in the formal sector, and unemployed women with official status and registered with the public employment agency. Informal workers are not covered by the scheme. It is worth noting that the level of maternity benefit is already higher than the food part of the subsistence minimum, but benefit still did not achieve the full subsistence minimum level.

Special attention should be given to bettering maternity protection of informal workers and the level of benefit assigned to all beneficiaries. Improvements to the maternity protection scheme in the Kyrgyz Republic may be made as follows:

- Extension of coverage, by extending the scope of existing scheme or introducing new contributory or non-contributory schemes for the informal workers; and
- Increasing the level of maternity cash benefits.

In the Kyrgyz Republic, based on the national law²⁹ the disability schemes covers all population. Monthly Social Benefit scheme covers those disabled citizens and ethnical Kyrgyz who obtained “kayrilman” status”, and are not entitled to pension security. State Social Disability Pension Insurance scheme covers only formal workers. Therefore, if the SSDPI scheme does not cover certain groups of population, it should be covered by MSB scheme.

But the real challenge persists in the issues related to the amount of the MSB which varies from 1,000 KGS to 3,000 KGS and thus all amounts of the disability benefits does reach the subsistence minimum of the worker considered as a basic minimum income needed for decent life. The disability pension level has quite similar amount, whose the average amount was slightly higher than the food part of the subsistence minimum (ABND assessment matrix).

It is worth noting that categorical benefits are not suitable enough for active forms of combating poverty, as the groups of beneficiaries are highly heterogeneous in terms of their income. Without the appropriate reform and changes in the existing social protection system, the effectiveness of social benefits itself is very low, significant amounts will continue to be spent without consideration of real needs. Therefore, vulnerable and poor groups are practically not receiving an adequate assistance. The reform of social benefits will ensure targeted distribution of social expenditures.

In the end, the national tripartite social dialogue is a key factor for the development of the social protection system. Implementation of the adopted decisions allows for further constructive and reliable dialogue between social partners. For example, postponing a decision made concerning the cancelling of mandatory contribution rate to Workers' Recovery Fund 0.25%, may weaken the constructiveness of the dialogue. Therefore, it is very important that social policies should be developed based on the tripartite consultations, and that decisions are consistently executed by all constituents in accordance with agreements made and on time.

²⁹ Law “On State benefits” No.318 (2009) and Law “On State pension social insurance” No.57 (1997).

Box no.5**Recommendations on improving the social protection of working-age persons developed within ABND*****Recommendations and scenarios to address policy gaps***

The Temporary Disability Benefit (sickness and employment injury benefit)	<ul style="list-style-type: none"> ✓ To improve the scheme to extend coverage to all employees engaged in the informal sector. ✓ To develop the mechanism to facilitate formalization of labour relations through social dialogue. ✓ Amend the legislation, i.e. to distinguish two benefits (benefits for temporary disability and maternity) and move maternity benefit to the category of maternity protection. Normally these two benefits are financed from different sources for different purposes.
---	---

Maternity Benefit	<ul style="list-style-type: none"> ✓ To increase the benefit and develop financial sustainability of Maternity Benefit scheme. ✓ To include new categories of recipients: full-time university students, seasonal workers and informal employees. ✓ In relation to C183 the points of discussion would be: (1) coverage and (2) benefit level. ILO C183 (maternity protection) defines the beneficiaries of as “all employed women, including those in atypical forms of dependent work” (article 2, para. 1). It defines the maternity benefit amount as “shall not be less than two-thirds of the woman's previous earnings or of such of those earnings”.
-------------------	---

Unemployment Benefit	<ul style="list-style-type: none"> ✓ The benefit amount shall be in compliance with Convention No.102. ✓ To cover unemployed people. ✓ Unemployed people do not address the employment services to get the benefit due to low level of awareness and low benefit amount.
----------------------	---

Recommendation and scenarios to address obstacles for implanting the social protection schemes

Free Social Services (for working-age)	<ul style="list-style-type: none"> ✓ To reform the social services system (to improve the status of workers, to increase the salary, etc. ✓ To analyse and monitor the services on a regular basis. ✓ To create services registry for disabled persons.
--	--

Unemployment Benefit	<ul style="list-style-type: none"> ✓ To raise the level of awareness among the people of working age with regard to unemployment benefit provision.
----------------------	--

MSB	<ul style="list-style-type: none"> ✓ Coordination of social protection system is required.
-----	---

State Social (permanent) Disability Pension Insurance	<ul style="list-style-type: none"> ✓ To increase the level of awareness among the population with regards to the right to a disability pension insurance and the qualifying conditions.
---	--

3.4 Old-age women and men

3.4.1 Present social protection system related to old-age women and men

Article 5(d) of the Social Protection Floors Recommendation, 2012 (No.202), defines the SPF for older people as “basic income security, at least at a nationally defined minimum level, for older persons”. Benefits may include old-age pensions as well as any other social benefits in cash or in kind. Schemes providing such benefits include universal benefit schemes, social insurance schemes, social assistance schemes etc. The necessary financial resources can be mobilized through a variety of different methods to ensure the financial, fiscal and economic sustainability of national social protection floors, taking into account the contributory capacities of different population groups.

According to Article 53 of the Constitution of the Kyrgyz Republic (adopted in 2010), the social rights for all citizens have been set out as follows:

1. All citizens have the right to social security in case of retirement, sickness and or loss of work capacity, or death of breadwinner.
2. All citizens have the right to pensions and social assistance. These are based on the economic development of the country and should guarantee no less than subsistence minimum standard of living.
3. All citizens have the right to participate in voluntary social insurance schemes as well as are encouraged to create additional social security forms.
4. Social activity of the state should not take the form of state guardianship; all citizens have the right to economic freedom and to pursue activities and opportunities to achieve economic welfare for himself and his family.

In this part of the report, the social protection schemes for older women and men in the Kyrgyz Republic are divided into three categories: (1) cash benefits, (2) nutrition and (3) social care. The basic legislative norms on each category are as follows:

Cash benefits:

- Law No.57 “On state social pension insurance” (1997);
- Law No.1194-XII “On pensions provided to military personnel” (1993);
- Law No.318 “On state benefits” (2009); and
- Statute No.822 and No.823 “On the procedure for granting the state benefits” (2009).

Nutrition:

- Statute No.7 “On cash nutrition standards in social institutions” (2008);
- Statute No.691 "On social security standards with regard to provision of social services to families and children, as well as to institutions, providing social services to children with deprived background (2012)"; and
- Government Decree No.694 “On the adoption of a subsistence minimum structure for the main social and age groups in the Kyrgyz Republic” (2009).

Social care:

- Law No.111 (art. 26) "On the basic principles of social services provision to population" (2001);

- Decree No. 255 “On approval of the List of Guaranteed Social Services Provided to the Population of the Kyrgyz Republic” (2011).

3.4.2 Analysis of current social protection coverage for old-age women and men

A. Coverage: scope and extent

The whole population, which includes nationals, foreigners and statelessness persons, are covered by the acting constitution and laws, and will therefore be secured once they reach the prescribed retirement age. They will receive an old-age pension or will receive as minimum a non-contributory old-age benefit (applicable only for nationals). The Constitution of the Kyrgyz Republic stipulates that all citizens shall have the right to social security after retirement. The legal coverage of income guarantee for old-age nationals is ensured in the forms of old-age pension and monthly social benefit at 100 per cent.

In 2015, 425,862 persons were within the retirement age, age 58-older for women and age 63-older for men, whereas, the total number of pensioners receiving old-age pension was 448,597,³⁰ this number includes the pensioners with early retirement.

Table 10. Social indicators of coverage in the Kyrgyz Republic, in 2015

	Male	Female	Total
Number of working age persons*	1,824,938	1,760,783	3,585,721
Number of retirement age persons**	128,957	296,905	425,862
Number of pensioners receiving old-age pension**	–	–	448,597
Number of persons receiving old-age benefit***	–	–	1,824
Number of persons receiving MSB provided to mothers heroines****	–	185	185

Source: NSC and SF 2015.

Data of NSC is available at <http://www.stat.kg/ru/statistics/naselenie/>

Notes:

* Working age period: women – 16 – 57 years; men 16–62 years;

** Retirement age period from: 58 years for women; 63 years for men;

*** Retirement age for social old age benefit from 60 years for women; 65 years for men;

**** Mothers-heroes receive the right to monthly social benefit at the age of 55 years.

There are many instances where social insurance schemes do not cover the agriculture sector, and in the Kyrgyz Republic, it is no different. This worldwide reality is also a major cause for concern in the Kyrgyz republic, due to the fact that 66.3 per cent (3.90 million) of its total population live in rural areas and the remaining 33.7 per cent (1.99 million) of the population live in urban areas (NSC, 2015).

³⁰ It includes early-retired pensioners, i.e. those who became pensioner before standard retirement age - 58 and 63 years.

This means that more than a third of the labour force population that is employed in the farming sector may have no coverage (G. Jumataeva “Development of the pension insurance system: practice and development prospects”, 2015).

The contribution rate for farmers is set at the level of base rate of land tax for the current year (see chapter 1.3.1). These existing rules determine the pension contribution rate to the Social Fund for farmers, which is substantially smaller than the rest of the population. For example, the public servant on average pays annually about 25,000 KGS in contributions to the state pension insurance system, whereas, the farmer on average pays only 400 KGS per year (G. Jumataeva, 2015). On the other hand, even if a farmer would like to pay more insurance contributions to the Social Fund than what is determined for them, she or he simply is not able to do so due to legal restrictions.

Another challenge the state pension insurance system faces is providing coverage for self-employed workers; the majority of whom do not pay contributions on a regular basis, or completely evade payment of social insurance contributions to the Social Fund. This is normally due to lack of interest or awareness of social protection schemes.

Additionally, as already described in chapter No.1, the Kyrgyz Republic struggles with between 39–42 per cent of informal economy, as well as a high volume of external labour migration. According to estimates of the Ministry of Labour and Social Development in 2014, 10 to 12 per cent (600–700 thousand people) of the total population of the Kyrgyz Republic has worked and lived abroad, the majority of who has worked and lived in the Russian Federation (NSC, 2015). Since their incomes were not registered in the Kyrgyz Republic, they did not pay contributions to the state pension insurance system and therefore, according to the present legislation, will not be qualified to receive a pension in the future.

However, the Eurasian Economic Union (EEU) is currently preparing the international agreement on pension security of labour migrants among the EEU member states, the Kyrgyz Republic being one of them since 2015. The EEC Board has already approved the draft of international agreement on pension security of labour migrants working in the member states and it is expected that the legal framework of the agreement will cover freedom of labour force movement and pension security within the EEU (EEC, 2016). So it is expected that the concerns related to pension coverage of migrant workers might be resolved in the near future.

Thus, the main concern about pensions in the Kyrgyz Republic is not the coverage of existing older women and men, who are already covered de facto and de jure 100 per cent; but instead the coverage of future pensioners, who are today’s current working age population who are not contributing sufficiently to the present pension system.

B. Adequacy of cash benefits and social services

Cash benefits for older women and men

In the Kyrgyz Republic, social protection of older women and men includes a number of statutory schemes stated by the Kyrgyz Republic, such as:

- State Social Pension Insurance (state old-age pension, survivor’s pension and voluntary state social insurance pension);

- Military Pension;
- Monthly Social Benefits (old-age benefit for regular retired persons and monthly social benefit to mothers-heroiners);
- Retiree Funeral Grant (lump sum of 15,000 KGS);³¹
- Free Social Services; and
- Cash Standards in Social Institutions.

In addition, there is a voluntary based pension scheme, which is called ‘Voluntary State Social Pension Insurance (VSSPI)’.

Box No.6
Structure and funding of the pension

(a) State Social Old-Age Pension is a contributory conditional monthly cash transfer that is provided to the retired insured person in order to replace their lost earnings. The citizens, who for any reason have no right to the old-age pension, are provided with the monthly social old-age benefit. Both women and men, who have reached the age of 58 and 63 respectively and accumulated the qualifying period of 25 years (men) and 20 years (women), have the right to receive the old-age pension.

Old-age and disability pensions have three components: the first is the base component and it is financed by the state budget (flat rate of 1,500 KGS in 2015), the second is an insurance component (Notional Defined Contribution-based)³² and the third is mandatory individual savings account. The second and third components are financed by contributions. Contribution rates are set at 23 per cent for the insurance component and 2 per cent for the mandatory individual savings account. The employers pay contributions for 15 per cent of monthly wage and employees pay contributions for 10 per cent of monthly wage.

The structure of the State Social Old-Age Pension is composed and financed as follows:³³

<i>Pension components</i>					
Basic component	+	Insurance component	+	Mandatory individual saving account	= Pension
<i>Source of funding</i>					
State provided 1,500 KGS	+	23 % of wage contribution rate (15 % by employer and 8 % by employee)	+	2% of wage contribution rate (2 % by employee)	= Pension

³¹ Assessment Matrix ABND.

³² Notional defined contribution is non-funded scheme, which uses the formula of a defined-contribution scheme as a benefit formula without accumulating the amount of reserves actually required to back up all entitlements (ILO Knowledge management platform).

³³ These rules applies to men born in 1964 or later and women born in 1969 or later. The pension of the other age categories consists of only two components: Basic (1500 KGS) and Insurance (all 25% contribution).

The Survivor pension only has two components: first, the base component (1,500 KGS) financed by the state budget, and second, the insurance component financed by contributions.

(b) Monthly Social Old-Age Benefit (MSB) is a non-contributory and conditional cash transfer that has two requirements. First, beneficiaries are those who are not eligible for State Social Security Pension schemes. Second, beneficiaries have reached the required retirement age corresponding to 60 years old for women and 65 years old for men. The amount of MSB for older people is set at 1,000 KGS (2015).

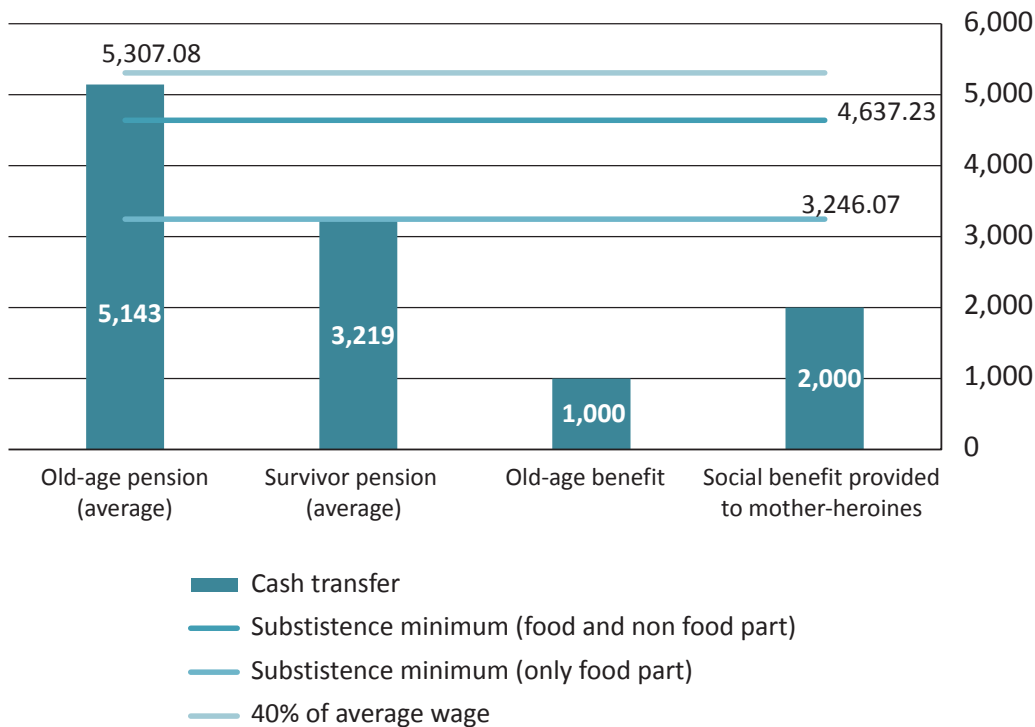
The Social Security (Minimum Standards) Convention of 1952 (No.102) stipulates that the amount for the pension must be 40 per cent of the reference wage. This percentage rises to 45 per cent if there is Invalidity, Old-Age and Survivors Convention, 1967 (No.128). It rises further to 55 per cent by Recommendation concerning Invalidity, Old-age and Survivors' Benefits, 1967 (No.131). The Recommendation No.131 also advocates for that the national legislation should fix the minimum amount of old-age benefits so as to ensure a minimum standard of living (ILO, 2002).

A possible approach to assessing the performance of the national pension system, is to compare the average level of pensions received to the average level of earnings in the economy, i.e. the relative income situation of pensioners compared to that of the employed population at any given point in time. The average amount of old-age pension was 5,143 KGS in 2015, which is approximately half of the national average wage.³⁴ Based on this, the estimated income replacement rate (38.76 per cent) is slightly lower than the minimum international required standard of 40 per cent.

The calculated average amount of old age pension is higher than the subsistence minimum of retirement age persons by 6.6 per cent; thus, the pension merely reduces the incidence of poverty but does not sufficiently serve to guarantee a decent standard of living for the retiree population of the Kyrgyz Republic. According to "Development of the pension insurance system: practice and development prospects" (G. Jumataeva 2015), about 58 per cent of retirees receive pensions lower than the subsistence minimum.

The amount of social benefits that persons receive on a monthly basis (see Figure 29) has not reached the subsistence minimum of 4,637.23 KGS. Nor has it reached the subsistence minimum for food equalling 3,246.07 KGS. The amount of old-age benefit should be increased by 2,246.36 KGS for the food portion, and increased by 3,637.23 KGS for the food and non-food portion of the benefit in order to reach the subsistence minimum thresholds.

³⁴ 100 per cent of the national average wage equals 13,257.70 KGS and 40 per cent equals 5,307.08 KGS.

Figure 29. Comparison of cash benefits for older persons and other social indicators, 2015

Source: Figure was designed by the authors based on MLSD (benefits amount), SF (pension's amount) and NSC (subsistence minimum) data.

Note: Old-age pension and survivor pension is presented as average amount.
In 2015, average wage was 13,267.70 KGS

Either way, the process of increasing and updating the pensions and social benefits should be performed regularly and in accordance with the current needs of the population. This will help increase the interest of workers to participate in pension insurance schemes and reduce their future dependency on social assistance schemes.

The main component of the present Kyrgyz pension system is based on the pay-as-you-go principle. The adequacy of the amounts of social security benefit provisions after retirement depends on contributions made by the present working age population.

C. Financial sustainability and affordability of social protection system: taxpayers, contributors and fiscal space

A good social protection system requires well-balanced contributory participation of employers, workers and others as contributors and taxpayers. A long-term investment is required in order to create and establish a reasonable social protection system. Nations who do not create and invest in good social protection schemes may face significant negative consequences such as poverty and unhealthy or low productive working age population (Social security for all, ILO, 2012).

As already noted in previous chapters, individuals who are informally employed are not eligible to receive the various social security benefits, including old-age pensions. At the moment, substantial numbers of informally employed individuals as well as informal economic activities are serious barriers to increasing the national revenue for the social protection budget. The present Kyrgyz pension system largely depends on the insurance component. Eventually, the system needs to depend on non-contributory old-age benefit scheme, and the expenditure from state budget will increase in mid/long-term perspectives as a consequence.

As in many other countries, in the Kyrgyz Republic women's participation rate in formal employment is lower than male participation; female labour forces are predominantly engaged in farming or unpaid domestic work. Their limited working experience in formal employment leads to shorter contributory periods. However, according to NSC, this does not impact the average pension amounts for women to that of men. For example, in 2015 there was merely a 344 KGS difference between the male average old-age pension amount of 5,072 KGS and the female average old-age pension amount of 4,728 KGS. In order to understand and assess the redistribution system of old-age pension provision by gender, it is necessary to carry out a more detailed analysis.

The actual number of pensioners and number of formal workers also affects the pension amounts. As long as it is financed based on PAYG, while the life expectancy and birth rates affects pensions in long term-perspective.

Figure 30 shows regional comparative data on how many older women and men exist per 100 working age persons. In 2010 in the Kyrgyz Republic, 100 working age persons covered 14 pensioners, this number decreased to 12 pensioners in 2015, which was significantly lower than the same indicator present in Ukraine at that time. When compared with countries of the region, the Kyrgyz Republic has quite a low dependency ratio.

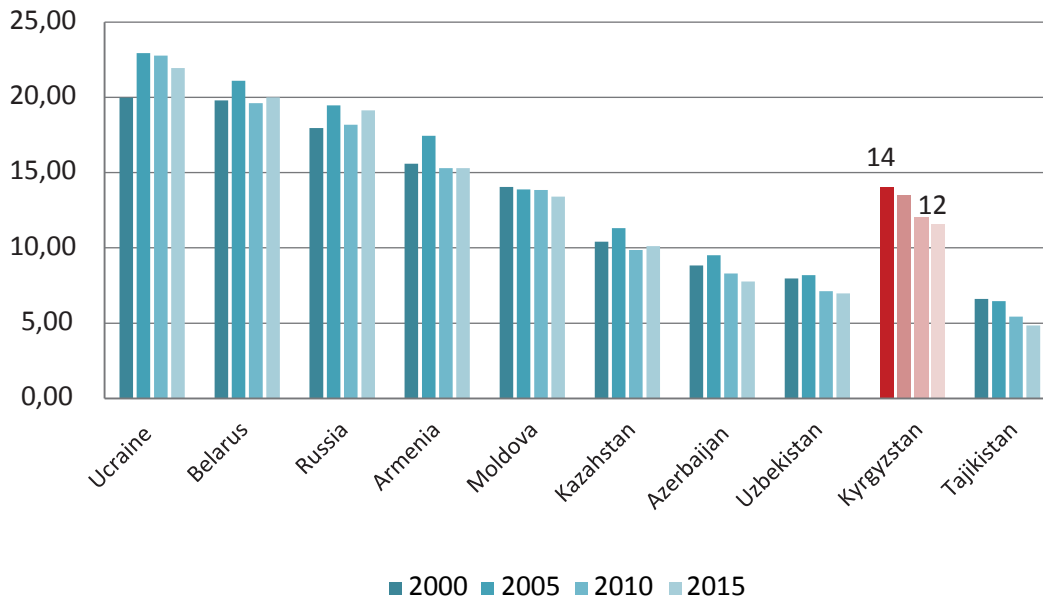
The demographic change strongly affects the affordability of the social protection system. The ageing population will increase the costs of the pension systems in the near future.

In 2014, the life expectancy at birth in the Kyrgyz Republic was lower than in the developed countries and quite similar to the other countries of the CIS region. For example, the average life expectancy at birth in Kazakhstan was 72 years (women – 76 years and men – 67 years), in Moldova it was 71 years (women – 76 years and men - 67 years), in the Russian Federation it was 70.5 years (women – 76 years and men – 65 years), in Tajikistan 69.5 years (women – 73 years and men 66 years) and in the Kyrgyz Republic it was 70 years on average (women – 75 years and men – 67 years).³⁵

In 2015 the NSC reported that in the Kyrgyz Republic, men retire at the age of 63 and live on average another 12.91 years, whereas women retire at the age 58 and live on average another 21.44 years. It is expected that men will receive an old age pension on average 12.91 years after retirement and women will receive about 21.44 years after retirement. The country's indicator shows a significant and growing gender gap (8.53 years) in life expectancy.

³⁵ Derived from male and female life expectancy at birth from sources such as: (1) United Nations Population Division. World Population Prospects, (2) Census reports and other statistical publications from national statistical offices, (3) Eurostat: Demographic Statistics, (4) United Nations Statistical Division. Population and Vital Statistics Report (various years), (5) U.S. Census Bureau: International Database, and (6) Secretariat of the Pacific Community: Statistics and Demography Programme.

Figure 30. Regional comparison of ratio: number of people age 65+ per 100 people age 15–64



Source: International Association of Pension and Social Funds, 2015.
Available at: <http://apsf.ru/Ufs2015/sm.shtml>

In 2010, the Kyrgyz Republic allocated 1.54 per cent of GDP as public social protection expenditure for older people (ILO WSPR year). This is lower than the world average of 3.3 per cent, though there was wide variation across the world. Countries in Western Europe on average allocated 11.1 per cent of GDP, Central and Eastern European countries allocated 8.3 per cent of GDP towards social protection expenditure for older people. Asia and the Pacific countries on average allocated 2 per cent, similarly Africa allocated 1.3 per cent of GDP towards social protection for older people. Figure 31 shows a map representation with information on pension expenditures worldwide.

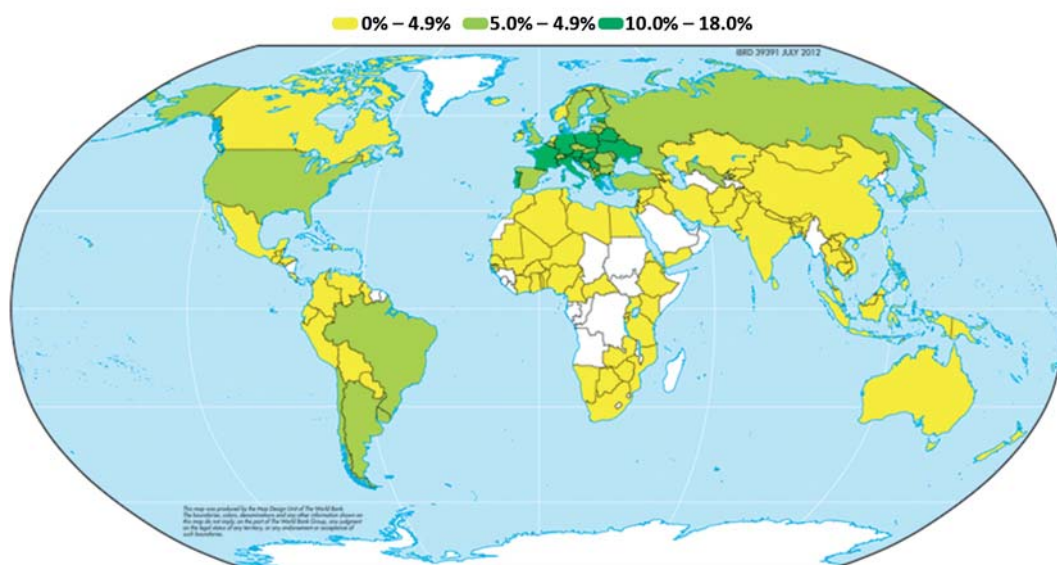
Nutrition and social service

Apart from the retired people subsistence minimum (RPSM), there are cash nutrition standards in social institutions set for carrying older citizens with disabilities. In 2015, RPSM is set at 4,637.23 KGS (including food and non-food components) monthly and the daily food allowance for older persons is set at 100 KGS per day.

In accordance with the Government Decree No.294 (2009), 70 per cent of the subsistence minimum for a retired person is designated towards food, 20 per cent goes to services and 10 per cent goes towards non-food products

Based on this information, the daily allowance for a retiree living with disabilities, is supposed to be calculated as follows: $4,637.23 \text{ KGS} / 30 \text{ days} \times 0.70 \text{ per cent} = 108.20 \text{ KGS}$ per day. In this respect, the daily allowance for retired persons should be increased by 8.2 KGS at least; this is in order to reach the minimum of the food portion for subsistence (FAO calculations).

Figure 31. Worldwide comparison of pension spending as per cent of GDP, late 2000s



Source: World Bank pension indicators.
 Available at: <http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/S/0,,contentMDK:23231994~menuPK:8874064~pagePK:148956~piPK:216618~theSitePK:396253,00.html>

3.4.3 Policy gaps and obstacles for implementing social protection schemes for old-age women and men

This section reviews the policy gaps of social protection for older people related to the national SPF raised by the SPF-WG members during the SPF-ABND process.

Policy gaps

- | | |
|------------------------------------|---|
| Legal/ policy framework | <ul style="list-style-type: none"> ✓ The benefit (pension) schemes do not fully meet the needs of beneficiaries. ✓ Gender gap with the retirement age: males retire at the age of 63 and females at the age of 58, while life expectancy for males is 66.75 years (2015) and for females – 74.75 years (2015). ✓ Inconsistency of legal framework between State Social Pension Insurance Scheme (SSPI) and Monthly Social Old Age Benefit Scheme (MSOB). ✓ SSPI – Small contributions provided by some categories (farmers, self-employed). |
| Coverage/ Target groups | <ul style="list-style-type: none"> ✓ MSOB is not appropriately targeted. ✓ SSPI – Low coverage of population. |
| Service provision/ benefit package | <ul style="list-style-type: none"> ✓ Old-age women and men receive insufficient pension amount to have a minimum guaranteed quality of life. |

Financing mechanism	✓ SSPI – actuarial unbalance of incoming revenues by types of sources in relation to the assumptions of the pension fund.
---------------------	---

Obstacles for implementing the schemes

Quality of services	✓ Low quality of free social services provided to old-age citizens (low qualification of social workers, outdated infrastructure).
Coverage/Target groups	✓ SSPI – Evasion of pension contribution (partial) by false claim of salary amounts.

3.4.4 Conclusions and recommendations

With regards to the minimum income guarantees for older women and men, the Kyrgyz Republic has already ensured legal coverage to the existing old age persons as part of the national policy, embedded in the comprehensive social protection system. Nevertheless, inadequate social protection levels exist in the Kyrgyz Republic, the two main ones are: first, the low coverage of workers (contributors) who are not entitled to receive pension in the future and second, the low amounts of social payments made to the present pensioners.

Upon the adoption of the international agreement on pension security of labour migrants working in the EEU, the problem of social protection for migrant workers should be finally solved (EEC, 2016).

About 58 per cent of pensioners receive pensions lower than the subsistence minimum. The problems of the low pension amounts derive from: high informal employment rates without social security contribution, low wage level and budgetary constraints of the national budget to subsidize national social security system³⁶ and lack of governance of the pension system. These three issues indirectly affect the amount of pension assigned to people.

Another challenge is low coverage and pension amounts of farmers and self-employed persons. For example in 2012, the share of farmers and self-employed persons in the national labour market was around 40 per cent, whereas the share of their contribution was merely 3 per cent of the total pension contributions paid. The remaining 97 per cent of contribution shares were composed by 40 per cent of public employees and 57 per cent private sector workers. Currently contribution rates for farmers and self-employed persons are kept low by national legislation, regardless of individuals' interest and or affordability to fully participate in the pension schemes.

Furthermore, the fact that the Kyrgyz Republic has quite a large informal economy (39–42 per cent in 2012) represents a serious barrier for collecting social security contributions

³⁶ Conception on Pension security development in the Kyrgyz Republic approved by Government Decree No.670 on 24 November 2014.

and increasing social payments. Effective extensions of coverage of social insurance to informal workers on a mandatory basis, such as rural workers and domestic workers can be considered as one of the key factors for the formalization of employment. The measure shall encourage workers to contribute to the system. It will eventually increase the revenue of the social protection budget and make its system more effective in the long terms. Transition from informal to formal economy is the key process for improving the social protection system.

In summary, the main challenges related to the SPF guarantee on social protection for older women and men are as follows:

- Strengthening SSPI to be further extended to all workers (including self-employed);
- Increasing the pension amount;
- Comprehensive reform of social protection system (pension in particular) towards the farmers and self-employed;
- Strengthening MSB as a guarantee the national SPF for older women and men;
- Effective investment of social security resources;
- Large informal economy and thus lack of financial resources;
- Dilution of pension and social benefit initial aims (adequacy of payments): pension shall ensure well-being and life in dignity for older people, whereas benefit should guarantee minimum income and thus prevent poverty; and
- Improving quality of social services, including increasing qualification of social workers.

In order to increase financial resources and the amount of social payments for older people, it is necessary to create a good economic environment such as sustainable growth, high productive employment and formal economy or its progressive formalization. Lastly, the strategy of social protection extension should be strictly correlated with national employment policy, which will establish very reasonable and attractive social insurance schemes.

Box no.7
Recommendations on improving the social protection of older people developed within ABND

Recommendations and scenarios to address policy gaps

SSPI	<ul style="list-style-type: none"> ✓ To tie the basic pension component payment (1,500 KGS) with the goal of poverty reduction among the retirees. ✓ To award the basic component to those retirees, whose insurance component does not exceed three minimum subsistence levels. Those retirees, whose insurance component is equal or exceeds three minimum subsistence levels, should not receive the basic component. ✓ Establishing sustainable pension financing mechanism ✓ Stop the increase of exceptional pension provisions, such as early retirement to certain occupational groups and/or additional pension payments to those working and living in high mountain areas etc.).
------	---

MSB	<ul style="list-style-type: none"> ✓ Develop the methodology of targeting needed.
-----	--

Recommendation and scenarios to address implementation issues

SSPI	<ul style="list-style-type: none"> ✓ Formalizations of employment. Annual indexation of insurance component will be tied with the inflation rate and average monthly wage dynamic. Pension indexation will be performed once per year. The insurance component will be indexed to the level allowed by the budget of Social Fund according to the following formula: indexation rate = 50% of consumer price index growth + 50% of average monthly wage growth. As a result, the expenses of the pension fund will be transparent and predictable and the most important thing is that the insurance principle will be observed.
------	---

Free social services	<ul style="list-style-type: none"> ✓ It is necessary to provide systematic capacity building of social workers.
----------------------	--

4 General conclusions and recommendations

In its aim to extend social protection floors through closing coverage gaps and improving social protection governance, the Assessment-Based National Dialogue (ABND) working group on Social Protection Floors (SPFs) has identified policy gaps and obstacles for improving or implementing social protection schemes that influence the wellbeing of the population in the Kyrgyz Republic. Closing coverage gaps and improving governance of social protection schemes is of the highest priority for equitable economic growth and social cohesion.

For this purpose, the Ministry Labour and Social Development of the Kyrgyz Republic with the technical support of the International Labour Organization has initiated the ABND on SPFs, assessment tool, which represents methodology developed to assess the social protection system, identify the policy gaps and elaborate recommendations for further reforming of the system.

In 2015 and 2016, in the context of deep analysis of the social protection system of the Kyrgyz Republic, with the support of the ILO Social Protection Department, the Ministry of Labour and Social Development of the Kyrgyz Republic (MLSD) implemented the survey using the ABND methodology. This methodology is implemented in a way that all stakeholders are involved in the social protection national dialogues and technical consultations, in order to choose the most important social protection schemes and programmes for improvement.

By organizing three national dialogues and several technical consultations between working group members, various data about the social protection in the country was collected and recommendations for improving social protection system were selected. Based on that and according to the ABND methodology, the main recommendations for the Kyrgyz Republic are:

- Increase the old-age pension level;
- Increase the monthly benefit to low income families with children;
- Improve the social service system;
- Increase the level of maternity benefit.

The assessment has shown the improvements of the social protection system in the Kyrgyz Republic over the past years. Still, according to technical and political consultations and based on social protection data collected from national ministries, funds, and especially from the National Statistical Committee of the Kyrgyz Republic, there are significant gaps related to cash transfer levels, groups of the population that are not covered and the quality of social protection schemes. Therefore, there is ample opportunity for further

improvement of the social protection system and extending Social Protection Floors for the whole population.

The tables below provides the list of main policy gaps under each guarantee and recommendations which could facilitate the extension of the SPFs:

1. Health

Policy gaps		Obstacles for implementing the schemes	
Coverage (including target groups)	<ul style="list-style-type: none"> – Poor targeting of beneficiaries (errors of inclusion) under GHA; – Low access of women and children to healthcare service on maternity protection under BPHIS; – Low coverage level by CHI scheme. 	Accessibility of services	<ul style="list-style-type: none"> – Limited geographical access of the population living in rural regions, to laboratory, diagnostic and healthcare services under GHA.
Service provision/benefit package	<ul style="list-style-type: none"> – Low quality of healthcare services under BPHIS; – Minimum required health care services not secured under BPHIS and CHI. 	Quality of services	<ul style="list-style-type: none"> – Low level of qualifications of healthcare personnel and lack of equipment under BPHIS; – The laboratories with old-fashioned or insufficient of medical equipment; – Lack of medical professionals in rural regions (eg. neuropathologists, cardiologists); – Underdeveloped network of healthcare centres with good infrastructure; – High turnover of medical professionals due to low wages.
Financing mechanism	<ul style="list-style-type: none"> – Limited access to expensive specialized healthcare services (oncology, cardio surgery, haematology, psychiatry) for vulnerable groups under BPHIS; 	Governance	<ul style="list-style-type: none"> – Insufficient inter-governmental cooperation.
		Information & Awareness	<ul style="list-style-type: none"> – Poor information on or practice of a healthy lifestyle and lack of information on healthcare services to

Policy gaps		Obstacles for implementing the schemes	
	<ul style="list-style-type: none"> – State budget deficit for running GHA; – Policy gap for covering the costs of health care services to military staff and students: Lack of budget allocation for their medical services under GHA programme. 		<ul style="list-style-type: none"> – the population under BPHIS.
Recommendations for addressing policy gaps		Recommendations on improving implementation	
Basic Public Health Insurance scheme	<ul style="list-style-type: none"> – Increase specialized health services to vulnerable social groups (oncology, cardio surgery, haematology, psychiatry); – Improvement in the quality of primary healthcare services including medicines (diagnostic aid, preventive care, and drug treatment and emergency medical aid); – Introduction of efficient technologies at the level of hospital treatment and emergency aid; – Increase in the level of maternity protection. 	Basic Public Health Insurance scheme	<ul style="list-style-type: none"> – Improvement of the inter-agency cross-sector collaboration among public institutions; – Development of information technologies and systems in the sphere of healthcare; – Improvement in access to services for emergency and specialized medical aid; – Improvement of the capacity of health care staff and employment conditions; – Promotion of healthy lifestyles under BPHIS.
Guaranteed Health Assistance	<ul style="list-style-type: none"> – Implementation of legal provisions with a secured budget or amendment of legislation in accordance with the actual health care practices under GHA. 	Guaranteed Health Assistance	<ul style="list-style-type: none"> – Development and improvement of public and private partnerships by amending the relevant legislation; – Reallocation of state budget on health to improve health service efficiency; – Improvement of human resource policy for health care workers with long-term planning.

Recommendations for addressing policy gaps		Recommendations on improving implementation	
Compulsory Health Insurance	<ul style="list-style-type: none"> – Extension of CHI coverage to informal workers. 	Voluntary Health Insurance	<ul style="list-style-type: none"> – Preparation of a strategy for establishing private health care centres with good infrastructure; – Improvement in the regulatory framework for the VHI programme.

2. Children

Policy gaps		Obstacles for implementing the schemes	
Legal and policy framework	<ul style="list-style-type: none"> – Lack of coordination between pension system and other social policies that survivor pension (contribution based) may become lower than MSB (non-contribution based); – The respective functions and authority of the state and municipalities responsible for developing social services are not defined by law. 	Beneficiary targeting/selection	<ul style="list-style-type: none"> – Poor targeting of MBLIF beneficiaries.
Service provision/benefit package	<ul style="list-style-type: none"> – Low benefit level of MBLIF leading to insufficient effects on poverty reduction for children (the average benefit contributes to just 12.5% of the subsistence minimum for children); – Extremely limited free social services at the local level on a regular basis; – Low qualifications of social workers and lack of advanced training systems for social workers and specialists working with children; 	Financial and administrative governance	<ul style="list-style-type: none"> – Lack of MBLIF and other data linkages between state and municipal service provision.

Policy gaps		Obstacles for implementing the schemes	
	<ul style="list-style-type: none"> – Insufficient number of social workers at the local social security administrations (lack of pathologists, teachers, psychologists, in particular those working with disabled children). 		
Financing mechanism	<ul style="list-style-type: none"> – Lack of systematic funding mechanisms to sustain free social services at the local level. 	Information & Awareness	<ul style="list-style-type: none"> – Low awareness about administrative procedures.
Recommendations for addressing policy gaps		Recommendations on improving implementation	
Monthly benefit to low income families with children	<ul style="list-style-type: none"> – Increase the amount of the MBLIF at least to the food-subsistence minimum to provide food and nutrition guarantees to children, then, eventually to the subsistence minimum (including food and non-food); – Develop additional instruments such as a productive safety net to complement the MBLIF, as a means to ensure a more progressive and sustainable approach to reducing chronic deprivation for children. 	Monthly benefit to low income families with children	<ul style="list-style-type: none"> – Improve the targeting methodology of MBLIF; – Improve the MBLIF scheme by automating the MBLIF provision system; – Improve interagency cooperation and develop a one-stop shop to simplify administration; – Improve the electronic database to facilitate interagency data exchange.
Monthly Social Benefit	<ul style="list-style-type: none"> – Harmonize social protection policies and social insurance policies. 		<ul style="list-style-type: none"> – Increase the qualification level of social workers and develop an advanced training system (including establishing a training facility infrastructure);
State social survivors' pension	<ul style="list-style-type: none"> – Align social insurance (such as survivors' pension) and social assistance systems to ensure that contribution-based benefits remain higher 	Free social services	<ul style="list-style-type: none"> – Increase the number of social workers; – Delegate the corresponding functions to the

Recommendations for addressing policy gaps		Recommendations on improving implementation	
State social survivors' pension	than non-contributory benefits.	Free social services	<p>municipal authorities to develop social service programmes in the regions that take into account the specific needs of the population;</p> <ul style="list-style-type: none"> – Develop a sustainable funding mechanism to run social services at the local level; – Review the work load of the social workers providing social services;

3. Working age women and men

Policy gaps		Obstacles for implementing the schemes	
Legal and policy framework	<ul style="list-style-type: none"> – Comment from NGOs/ ILO: Pregnancy and childbirth attributed to variety of temporary disability, i.e. the category of diseases that are the basis for the appointment and payment of the relevant benefits. However, pregnancy is not a disease, it is a female reproductive function. 	Quality of services	<ul style="list-style-type: none"> – Free Social Services: Staff shortage and high staff turnover due to low salaries of social workers, who provide social services, in particular to disabled individuals.
Coverage/ Target groups	<ul style="list-style-type: none"> – The temporary disability benefit (sickness and employment injury benefit) does not cover people working in the informal economy (For example, individuals employed by NGOs, commercial organizations). In 2012, 52% of salaries in commercial organizations were paid with the false tax claims and social security 	Financial and administrative Governance (incl. M&E)	<ul style="list-style-type: none"> – Regarding the temporary disability benefit (sickness and employment injury benefit), a number of employers do not register all employees, thus avoiding the responsibility to pay the benefit upon the occurrence of corresponding social risk (sickness). – Free Social Services: Failure to analyse and monitor social services

Policy gaps		Obstacles for implementing the schemes	
Coverage/ Target groups	<p>contributions; 39–42% of economy was in the informal sector).</p> <ul style="list-style-type: none"> – Maternity benefit: workers in the informal economy, full-time university students (extra-mural student), seasonal workers are not covered by the scheme. – Unemployment benefit: Low coverage of unemployed persons by the scheme (low number of beneficiaries of scheme). 	Financial and administrative Governance (incl. M&E)	<p>rendered to the population.</p> <ul style="list-style-type: none"> – Free Social Services: Administrative shortages – Lack of services registry for the disabled persons.
Service provision/ benefit package	<ul style="list-style-type: none"> – Maternity benefit: Insufficient level of provision to women living in valley areas. The amounts of benefit differ greatly for those, who are living in high mountainous regions (highlands, flatlands), and those, who are living in the valley areas. – Funeral grant: low amount of benefit. – Low amount of unemployment benefit. – Regarding the MSB: the amounts of monthly social benefit paid to disabled persons may exceed the amounts of pensions paid to the disabled persons 	Information & Awareness issues	<ul style="list-style-type: none"> – Regarding the unemployment benefit there is a low level of awareness among people of working age, especially among those, who are working in private organizations and engaged in the informal sector. – There is a low level of awareness among the population with regards to the right to a disability pension insurance, which is the State Social (permanent) Disability Pension Insurance.
Recommendations for addressing policy gaps		Recommendations on improving implementation	
The Temporary Disability Benefit (sickness and employment injury benefit)	<ul style="list-style-type: none"> – To improve the scheme to extend coverage to all employees engaged in the informal sector. – To develop the mechanism to facilitate formalization of labour 	Free Social Services (for working-age)	<ul style="list-style-type: none"> – To reform the social services system (to improve the status of workers, to increase the salary, etc. – To analyse and monitor the services on a regular basis.

Recommendations for addressing policy gaps		Recommendations on improving implementation	
The Temporary Disability Benefit (sickness and employment injury benefit)	<ul style="list-style-type: none"> relations through social dialogue – Amend the legislation, i.e. to distinguish two benefits (benefits for temporary disability and maternity) and move maternity benefit to the category of maternity protection. Normally these two benefits are financed from different sources for different purposes. 	Free Social Services (for working-age)	<ul style="list-style-type: none"> – To create services registry for disabled persons.
Maternity Benefit	<ul style="list-style-type: none"> – To increase the benefit and develop financial sustainability of Maternity Benefit scheme. – To include new categories of recipients: full-time university students (extra-mural student), seasonal workers and informal employees. – In relation to C183 the points of discussion would be: (1) coverage and (2) benefit level. ILO C183 (maternity protection) defines the beneficiaries of as “all employed women, including those in atypical forms of dependent work” (article 2, para. 1). It defines the maternity benefit amount as “shall not be less than two-thirds of the woman’s previous earnings or of such of those earnings”. 	Unemployment Benefit	<ul style="list-style-type: none"> – To raise the level of awareness among the people of working age with regard to unemployment benefit provision.
		Monthly Social Benefit	<ul style="list-style-type: none"> – Coordination of social protection system is required
		State Social (permanent) Disability Pension Insurance.	<ul style="list-style-type: none"> – To increase the level of awareness among the population with regards to the right to a disability pension insurance and the qualifying conditions
Unemployment Benefit	<ul style="list-style-type: none"> – The benefit amount shall be in compliance with Convention No.102 		

Recommendations for addressing policy gaps		Recommendations on improving implementation	
Unemployment Benefit	<ul style="list-style-type: none"> – To cover unemployed people. – Unemployed people do not address the employment services to get the benefit due to low level of awareness and low benefit amount. 		

4. Older women and men

Policy gaps		Obstacles for implementing the schemes	
Legal and policy framework	<ul style="list-style-type: none"> – The benefit (pension) schemes do not fully meet the needs of beneficiaries. – Gender gap with the retirement age: males retire at the age of 63 and females at the age of 58, while life expectancy for males is 66.75 years (2015) and for females – 74.75 years (2015). – Inconsistency of legal framework between State Social Pension Insurance Scheme (SSPI) and Monthly Social Old Age Benefit Scheme (MSOB). – SSPI - Small contributions provided by some categories (farmers, self-employed). 	Quality of services	<ul style="list-style-type: none"> – Low quality of free social services provided to old-age citizens (low qualification of social workers, out dated infrastructure).
Coverage/ Target groups	<ul style="list-style-type: none"> – Monthly Social Old-age Benefit is not appropriately targeted. – SSPI – Low coverage of population. 	Coverage/ Target groups	<ul style="list-style-type: none"> – State Social Pension Insurance : Evasion of pension contribution (partial) by false claim of salary amounts.

Policy gaps		Obstacles for implementing the schemes	
Service provision/ benefit package	– Old-age women and men receive insufficient pension amount to have a minimum guaranteed quality of life.		
Financing mechanism	– SSPI actuarial unbalance of incoming revenues by types of sources in relation to the assumptions of the pension fund		
Recommendations for addressing policy gaps		Recommendations on improving implementation	
State Social Pension Insurance	<ul style="list-style-type: none"> – To tie the basic pension component payment (1,500 KGS) with the goal of poverty reduction among the retirees. – To award the basic component to those retirees, whose insurance component does not exceed three minimum subsistence levels. Those retirees, whose insurance component is equal or exceeds three minimum subsistence levels, should not receive the basic component. – Establishing sustainable pension financing mechanism. – Stop the increase of exceptional pension provisions, such as early retirement to certain occupational groups and/or additional pension payments to those working and living in high mountain areas etc.). 	State Social Pension Insurance	<ul style="list-style-type: none"> – Formalizations of employment. – Annual indexation of insurance component will be tied with the inflation rate and average monthly wage dynamic. Pension indexation will be performed once per year. The insurance component will be indexed to the level allowed by the budget of Social Fund according to the following formula: indexation rate = 50% of consumer price index growth + 50% of average monthly wage growth. As a result, the expenses of the pension fund will be transparent and predictable and the most important thing is that the insurance principle will be observed.

Recommendations for addressing policy gaps		Recommendations on improving implementation	
Monthly Social Benefit	– Develop the methodology of targeting needed.	Free social services	– It is necessary to provide systematic capacity building of social workers.

Annex

Annex I. Second Assessment-Based National Dialogue on Social Protection Floors in the Kyrgyz Republic

Recommendations adopted at the Second Assessment-Based National Dialogue on Social Protection Floors in the Kyrgyz Republic

I. Introduction

1. Social Protection Floors: Origins

With the onset of the 2008 global financial and economic crisis, people around the world faced lower income, fewer employment and livelihood opportunities, and reduced access to social services, benefits, remittances and credit. In response to this, the High Level Committee on Programmes of the United Nations System Chief Executive Board (UNCEB) committed to decisive and urgent multilateral actions and agreed on nine joint initiatives in April, 2009. The sixth initiative was the Social Protection Floor Initiative (SPF-I), which advocates for the provision of social transfers and access to essential services for all individuals.

2. Social Protection Floors Recommendation, 2012 (No.202)

As a result of intensive discussions across three sessions of the International Labour Conference (2001, 2011 and 2012) confirming the necessity of building social protection floors and comprehensive social security systems, and with the endorsements of the G20 and the United Nations, the Governments, workers' and employers' organizations of the ILO member States adopted the Social Protection Floors Recommendation (No.202) at the International Labour Conference in June, 2012.

The Social Protection Floors Recommendation, 2012 (No.202) provides guidance to member States in building comprehensive social security systems and extending social security coverage by prioritizing the establishment of national social protection floors accessible to all in need. The Recommendation aims at ensuring that all members of society enjoy at least a basic level of social security throughout their lives.

The national SPF shall consist of the following four social security guarantees throughout the life cycle, as defined at the national level:

- access to essential health care, including maternity care;
- basic income security for children, providing access to nutrition, education, care and any other necessary goods and services;
- basic income security for persons in active age who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability;
- basic income security for older persons.

3. Assessment-based national dialogue on social protection (ABND)

The ABND as an implementation tool for improving national social protection floors was included in the Social Protection Development Programme for 2015–2017, which was adopted by the Resolution of the Government of the Kyrgyz Republic, No.85 (February 27, 2015).

In recognition of the need to take stock of existing social protection realities in order to understand what elements of national SPFs are in place and where “gaps” in the SPFs exist, the ILO collaborated with governments, social partners, civil society, academicians, and UN agencies in the Kyrgyz Republic to conduct social protection assessment-based national dialogue exercises.

The ABND exercise assesses how the SPF is placed and further extended in the country. Policy gaps and obstacles for implementing social protection schemes are identified and a set of recommendations is developed for further design and implementation of social protection provisions that would guarantee an SPF for all residents.

II. Assessment-based national dialogue in the Kyrgyz Republic

1. The launch of the ABND in the Kyrgyz Republic

The launch of the ABND in the Kyrgyz Republic was organised on 4 December, 2014 where the Government and the UN country team reaffirmed the necessity of conducting ABND and came up with a schedule for the organisation of the ABND in the Kyrgyz Republic.

The ABND in the Kyrgyz Republic follows three agreed steps: preparation of a legal matrix and costing scenarios, development of recommendations into optimal policy options for national actions, finalisation of the report and submission to the Government.

The ABND is based on a national dialogue intensive consultative process composed of representatives from the government, workers and employer' organisations, the civil society, UN agencies, international financial institutions and development partners.

Main conclusions and recommendations from the ABND launch in the Kyrgyz Republic were as follows:

1. The ABND of social protection is relevant and timely;
2. It is important to assess the whole social protection system which requires inter-ministerial coordination;
3. The matrix should reflect the priorities of the country, with a special emphasis on disabilities, wages etc.;
4. The national dialogue will require broad consultations with policymakers, and the work of a technical unit composed of experts from participating ministries and institutions.

Based on the Action plan of Social Protection Development Programme 2015–2017, article no.59 a working group on ABND SPF was established on the 10 of March, 2015 by the Ministry of Labour and Social Development (form. Ministry of Social Development) of the Kyrgyz Republic (Resolution No.9).

2. The First Assessment-Based National Dialogue: 17–19 June 2015

The first ABND in the Kyrgyz Republic was organized to discuss the National Social Protection Floors on 17–19 June, 2015 in Koi-Tash and Bishkek at the initiative of the Ministry of Labour and Social Development.

The members of Technical Working Group discussed the draft ABND legal matrix prepared by the ILO.

The main findings based on the assessment matrix with policy gaps, obstacles for implementing social protection schemes and recommendations were shared at a high-level roundtable organized at the end of the first ABND. The matrix covered four SPF guarantees, including access to health care; social protection for children, working-age population and elderly persons.

3. The Second Assessment-Based National Dialogue: 17–19 February 2016

The ABND SPF Working Group has been called upon to participate in the discussion to examine the present social protection system in the Kyrgyz Republic. The main purposes of the second ABND were to formulate the recommendations by selecting the priorities for national action in the field of social protection and promote the implementation of the relevant decisions adopted by the Working Group at its second Assessment-Based National Dialogue.

The ABND Working Group in the Kyrgyz Republic consists of the following representatives:

- Government ministries, agencies and funds;
- Civil society and social partners; and
- United Nations agencies, international financial institutions and donor community.

The ABND Working Group is the multilateral social protection machinery that allows for in-depth deliberations on specific social protection issues, leading to the submission of concrete recommendations and prioritizations.

The second ABND resulted in the following recommendations as priorities for national action in the field of social protection, as set out by each stakeholder group:

Health

Government ministries, agencies and funds

- Improving the quality of healthcare services;
- Staffing in the regions (in remote areas).

The social partners and civil society

- Extending coverage of informal workers by compulsory health insurance;
- Improving access of vulnerable groups to inexpensive, high quality medicines.

United Nations agencies, international financial institutions and the donor community

- Defining a minimum quality of health services;
- Ensuring access of vulnerable groups to health services.

Children

Government ministries, agencies and funds

- Increasing the level of monthly benefit to low income families with children;
- Indexing the survivor pension.

The social partners and civil society

- Increasing the level of monthly benefit to low income families with children to the food-subsistence minimum level;
- Extending the access of social services of alternative boarding school institutions.

United Nations agencies, international financial institutions and the donor community

- Increasing the level of monthly benefit to low income families with children to the food-subsistence minimum level;
- Improving the social service system.

The working age population

Government ministries, agencies and funds

- Developing mechanisms for formalising labour relations;
- Increasing the maternity benefit.

The social partners and civil society

- Increasing the maternity benefit to not less than two-thirds of income;
- Extending maternity coverage to informal workers.

United Nations agencies, international financial institutions and the donor community

- Increasing the unemployment benefit level;
- Extending maternity protection to the informal sector.

Elderly

Government ministries, agencies and funds

- Increasing the pension level;
- Developing alternative services (rehabilitation and day care centres, hospices) at the local level.

The social partners and civil society

- Strengthening the basic component of the old-age pension by increasing it to the subsistence minimum level of the pensioner;
- Increasing the monthly social old-age benefit to the subsistence minimum level of the pensioner.

United Nations agencies, international financial institutions and the donor community

- Strengthening the basic component of the pension;
- Improving the social service system.

In follow up to the list of priorities presented by each stakeholder group mentioned above, a final round of participatory consultations took place and the ABND Working Group selected and agreed upon the following recommendations as priorities for further action:

The main priorities:

- Increase the pension level;
- Increase the monthly benefit to low income families with children.

Additional priorities:

- Improve the social service system;
- Increase the level of maternity benefit.

On the last day of the second ABND, a set of recommendations with the above-mentioned four priorities on social protection were presented and adopted at the high-level ABND national roundtable attended by the Vice Prime Minister and high-level representatives (ministers, chairpersons) of the line ministries, funds and agencies.

III. The results of the second ABND will be reflected in the final report on “The Social Protection Floor: Assessment-Based National Dialogue in the Kyrgyz Republic”. The report is expected to be submitted to the Government of the Kyrgyz Republic at the third ABND, currently planned in late 2016

Institutions and organizations of the Second Assessment-Based National Dialogue on the SPF

Ministries and agencies

1. Ministry of Labour and Social Development
2. Republican Centre of Medical and Social Expertise
3. Ministry of Finance
4. Ministry of Economy
5. Ministry of Health
6. Public Security Headquarters of the Ministry of Internal Affairs
7. State Agency on self-government issues and inter-ethnic relations
8. Compulsory Health Insurance Fund
9. Social Fund
10. Ministry of Education and Science
11. National Statistical Committee
12. State Inspection on Environmental and Technical Safety

Employers' organizations

1. National Confederation of Employers

Trade Unions

1. Federation of Trade Unions

International organizations

1. United Nations Development Programme
2. International Labour Organization
3. United Nations Office for the Coordination of Humanitarian Affairs
4. World Food Programme
5. United Nations Fund Population
6. United Nations International Children's Fund
7. UN Women
8. Food and Agriculture Organization of the United Nations
9. HelpAge
10. World Bank

Non-governmental organizations

1. The League of Defenders' for Child Rights
2. Children' Protection Centre
3. Family to Every Child
4. Association of Women with Disabilities
5. Institute for Childhood

Researches and independent experts also took part in the ABND.

Annex II. Health schemes for all

1. Basic Public Health Insurance Scheme (BPHIS)

Legal framework	<ul style="list-style-type: none"> • Law No.112 “On medical insurance of the citizens” (1999); • Law No.6 “On health protection of the citizens” (2005); and • Law No.159 “On the single-payer system for healthcare financing in the Kyrgyz Republic” (2003).
Target group	The scheme covers all Kyrgyz citizens.
Benefit package	The Basic Public Health Insurance Scheme provides health care to the citizens of the Kyrgyz Republic with quality medical and preventive assistance under the Guaranteed Health Assistance programme (see benefit package of GHA programme).
Operating and Financing Actors	The Ministry of Finance, Compulsory Health Insurance Fund, the Ministry of Health.
Financing	The State budget and the Compulsory Health Insurance Fund.
Other information	<p>NB: The Guaranteed Healthcare Assistance Programme is part of Basic Public Health Insurance Scheme (BPHIS)</p> <p>1.1. Guaranteed Healthcare Assistance programme (GHA) (State guarantee programme)</p> <p>Legal framework: Law No.6 “On health protection of the citizens” (2005); and Government Decree No.229 on the adoption of the “State Guarantee Programme with regard to healthcare provision to the citizens” (2014).</p> <p>Target group: All citizens, including social groups (war veterans, disabled persons, heroes, persons living with HIV) and pregnant women and children under the age of 5 (These categories are entitled to free medical care services).</p> <p>From 2015, all pregnant women registered in the clinics are covered for free under CHI policies provided by the CHI Fund. This allows all women to receive medicine assistance under the additional CHI programme at the outpatient level regardless of their insurance status.</p> <p>Benefit package:</p> <ul style="list-style-type: none"> – Primary healthcare (free of charge for insured persons, children ages 1 to 4 years and children (pupils) to 18 years, pensioners, beneficiaries of monthly social benefits, persons who bought health insurance policies and designated social categories (war veterans, persons living with HIV, disabled persons etc.); – Emergency medical services (free of charge for all citizens); – Specialized healthcare (free of charge for war veterans and persons living with HIV; out of pocket payments for children ages 5 to 16 years (pupils) but no older than 18 years old, pensioners, disabled persons, and other categories; and out of pocket payments for all citizens regardless of category for expensive health care services);

- Hospital (free of charge for war veterans and labour heroes; minimum amount of out of pocket contribution for pensioners, beneficiaries of monthly social benefits; average amount of out of pocket contribution for insured persons and children ages 5 to 16 years (pupils) but no older than 18 years old);
 - Medical assistance for high technology and expensive methods of treatment (fully chargeable or partially covered by Fund of High Technologies);
 - Dental care (free of charge for all citizens: preventive measures, consultation);
 - Medicine and vaccine assistance;
 - Immunological prophylaxis (free of charge for all citizens).
- Operating and Financing Actors:** The Ministry of Health, The Ministry of Finance.
- Financing:** The scheme is funded from the State budget and the Compulsory Health Insurance Fund.
- Population covered:** The scheme covers 931,519 persons.

2. Compulsory Health Insurance Scheme (CHI)

Legal framework	<ul style="list-style-type: none"> • Law No.112 “On health insurance of the citizens” (1999); • Law No.6 “On health protection of the citizens” (2005); • Government Decree No.215 “Regulations on the Compulsory Health Insurance Fund under the Ministry of Health” (2003); and • Law No.159 “On the single-payer system for health care financing in the Kyrgyz Republic” (2003).
Target group	<p>All insured persons:</p> <p>(a) working citizens;</p> <p>(b) retired citizens, registered unemployed citizens, children under the age of 16 (pupils under the age of 18), students under the age of 21 (except for the students of distance and evening classes (the amount is calculated with the help of minimum basic rate of 1.5 per annum);</p> <p>(c) self-employed citizens (who pay contributions under the CHI), military staff (in case the CHI policies are purchase by the military forces at the CHI Fund); and</p> <p>(d) people who bought personal CHI Policies at the cost of 1012 KGS/month, including foreign citizens, persons without citizenship who are permanently residing in the Kyrgyz Republic (in accordance with the current legislation).</p>
Benefit package	<p>Compulsory health insurance consists of basic and additional programmes.</p> <p>The basic programme of the CHI determines the amount and conditions for providing health and preventive health care services, and within this programme, insured citizens have right to medicines for free of charge.</p>

	Additional programmes of the CHI are determined by the scope and conditions for the provision of medical and preventive health care services, drug supply, rehabilitation and recreational care, for what is needed additional payments by insured persons.
Operating and Financing Actors	The Ministry of Health, Compulsory Health Insurance Fund, the Ministry of Finance.
Financing	Funded from the State budget and from contributions from employers (2 per cent of wage - contribution rate).

3. Voluntary Health Insurance Scheme (VHI)

Legal framework	<ul style="list-style-type: none"> • Law No.112 "On health insurance of the citizens" (1999); and • Law No.6 "On health protection of the citizens" (2005).
Target group	Citizens.
Benefit package	It depends on the contents of each health insurance package provided by private insurance companies.
Eligibility	Voluntary participation.
Financing	Funded by private insurance companies.

Annex III. Social protection schemes covering children

1. Monthly Benefit to Low Income Families with Children (MBLIF)

Legal framework	<ul style="list-style-type: none"> • Law No.318 "On State benefits" (2009); • Statute No.824 "On procedure for calculation of family total income for monthly benefit provision to low income families with children"; • Statute No.825 "On guaranteed minimum income" (2009); and • Statute No.133 "The procedure for calculation of standard income from allotments and farmlands" (2011).
Target group and eligibility	<p>a. Children in a low-income family</p> <p>b. Children (the citizens of the Kyrgyz Republic or ethnic Kyrgyzes, who came back to the Kyrgyzstan and obtained "Kayrilman" status) living in low-income families.</p> <p><i>Note:</i> Low-income family is defined as a family with a monthly income per family member below the guaranteed minimum income (810 KGS per each family member).</p>
Benefit package	<p>Period of payment: 12 months (maximum)</p> <p>Amount:</p> <p>(a) children under the age of 18 years may receive 705 KGS maximum;</p> <p>(b) at child's birth – 300 per cent of GMI is paid as a lump sum;</p> <p>(c) If twins under the age of 3 years then 100 per cent of GMI per child;</p> <p>(d) If triplets, quadruplets, and so on under the age of 16 years then 150 per cent of GMI per child.</p> <p>GMI = 810 KGS (July 2015)</p>
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Population covered	336,000 recipients (Social protection development programme, 2015–2017).

2. Monthly Social Benefit (MSB)³⁷

Legal framework	<ul style="list-style-type: none"> • Law No.318 "On State benefits" (2009); and • Statute No.822 "On the procedure for granting state benefits" (2009).
-----------------	---

³⁷ Monthly Social Benefit scheme covers children, disabled working age persons and elderly. But here, only the MSB for children is covered.

Target group and eligibility	<p>a. Children;</p> <p>b. Children (the citizens of the Kyrgyz Republic or ethnic Kyrgyzes, who came back to the Kyrgyzstan and obtained “Kayrilman” status), disabled citizens without the right to pension payments, and ethnic Kyrgyzes and foreign citizens in accordance with the law.</p>
Benefit package	<p>(a) children with disabilities – 3,000 KGS per month;</p> <p>(b) children living with HIV/AIDS – 3,000 KGS per month;</p> <p>(c) children born of parents living with HIV/AIDS (under the age of 18 months – 3,000 KGS per month;</p> <p>(d) dependents children whose breadwinner deceased – 1,000 KGS per month;</p> <p>(e) orphans without the right to state social pension insurance (SSPI) – 2,000 KGS per month.</p>
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Population covered	27,501 recipients (children with disabilities), 16,501 children (receives survivor benefits) (MLSD, May 2015).

3. Free Social Services

Legal framework	<ul style="list-style-type: none"> • Law No.111 (art.26) "On the basic principles of social services provision to population" (2001).
Target groups and eligibility	<p>a. Disabled children, children of military and law enforcement personnel, orphans and children deprived of parental care;</p> <p>b. Citizens of the Kyrgyz Republic.</p>
Benefit package	Residential care facilities, social medical assistance, social psychological assistance, social pedagogical assistance, social legal assistance etc.
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Health, the Ministry of Education and Science.
Financing	The state budget.
Other information	<p>Wages in 2013 for social and health workers:</p> <p>Batken – 8,263 KGS per month; Jalal-Abad oblast – 8,645 KGS per month; Issyk-Kul oblast – 8,516 KGS per month; Naryn – 12,426 KGS per month; Osh oblast – 8,257 KGS per month; Talas oblast – 9,132 KGS per month; Chui oblast – 9,150 KGS per month; Bishkek – 10,637.2 KGS per month; Osh – 7,762.9 KGS per month (NSC, 2013).</p> <p>Number of social and health care workers (in thousands): 2011 – 78.5; 2010 – 74.4; 2009 – 79.4; 2008 – 86.2 (NSC, 2008, 2009, 2010).</p>

4. Primary and Basic Education

Legal framework	<ul style="list-style-type: none"> • Law No.92 "On education" (2003)
Target group and eligibility	<p>a. All children, residing in Kyrgyz Republic;</p> <p>b. All residents of the Kyrgyz Republic (including foreign citizens and persons without citizenship – special rules and requirements).</p>
Benefit package	<p>Free of charge for all children.</p> <p>Grades:</p> <ul style="list-style-type: none"> • Primary education – 1–4 grades; • Basic education – 5–9 grades. <p><i>Note:</i> Usually, children at age of 6 or 7 are enrolled in the first grade of the primary education.</p>
Operating and Financing Actors	The Ministry of Education and Science.
Financing	The state and local budgets.

5. Cash Nutrition Standards in Social Institutions

Legal framework	<ul style="list-style-type: none"> • Statute No.691 "On social standards with regard to provision of social services to families and children, as well as to institutions, providing social services to children with deprived backgrounds" (October 9, 2012); and • Statute No.7 "Cash nutrition standards in social institutions" (January 15, 2008).
Target group and eligibility	a. Foster children, 2) orphans, 3) students and pupils under guardianship.
Benefits	1) For orphans deprived of parental care and placed in orphanage boarding schools of all types - 110 KGS/day; 2) for orphans studying at the elementary vocational education institutions, specialised secondary and higher educational institutions – 50 KGS/day; 3) for students and pupils under guardianship (during the study) – 18 KGS/day; 4) for infants in infant orphanages – 50 KGS/day.
Operating and Financing Actors	Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Other information	The ratio of children aged 1–6 years who are underweight: 7.2 per cent in 2012 and 8.7 per cent in 2013.

6. National School Meal Programme

Legal framework	<ul style="list-style-type: none"> • Resolution of Prime Minister dated 25 December 2014 on the Policy for the National School Meals Programme; and • School feeding strategy.
Target group and eligibility	Primary school children.
Benefit package/ calculation	Food rations.
Operating and Financing Actors	Ministry of Education and Science, Ministry of Finance, Ministry of Health.
Financing	State budgets and parental/community contributions.

7. State Social Survivors' Pension

Legal framework	<ul style="list-style-type: none"> • Law No.57 "On State social pension insurance" (1997)
Target group and eligibility	<ol style="list-style-type: none"> a. Children who are dependents of insured persons; b. Children (including those, who were adopted, stepsons and stepdaughters) under the age of 16 years, or disabled children under the age of 18 years. The qualifying period for a deceased person under the age of 23 years should be equal to one year; for ages 23 to 26 years, two years; for ages 26 to 31 years, three years ; and age of 31 years and older, five years.
Benefit package	<p>Amount:</p> <ol style="list-style-type: none"> a) 50 per cent for one dependent; b) 90 per cent for two dependents; c) 120 per cent for three dependents; d) 150 per cent for four and more dependents; and e) Children who have lost both parents – receive a double pension. <p><i>Note:</i> Per cent of basic and insurance components of the II group disability pension of a deceased breadwinner (in 2014, the average pension was 3,202 KGS per month).</p>
Operating and Financing Actors	The Social Fund.
Financing	Contributions by the employers and employees (insured persons).

Annex IV. Social protection schemes covering working-age women and men

1. Temporary Disability Benefit (TDB: sickness and employment injury benefit)

Legal framework	<ul style="list-style-type: none"> • Labour Code No.106 (art. 194) (2004); • Statute No.727 "On the procedure of granting, payment and amount of temporary disability benefit and maternity benefit" (2011); • Law No. 33 "On State guarantees and compensation for people living and working in high altitudes and remote inaccessible areas" (1996); • Law No. 20 "On State Social Insurance"(1996); • Resolution No.1115-111 of the Jogorku Kenesh of the Kyrgyz Republic "On approval of the basic rate" (15 June 2006); and • Government Decree No.152 "Instruction on temporary disability examination at healthcare institutions" (2012).
Target group and eligibility	<p>a. Workers temporarily unable to work due to illness or injury;</p> <p>b. Citizens who pay contributions to the state social insurance system, upon presentation of a medical certificate (report), issued in the established order by health organizations.</p> <p>Formally employed individuals, members of peasant (farm) households, individual entrepreneurs, and foreign citizens from Eurasian Economic Union (EEU) countries who are working in the Kyrgyz Republic.</p>
Benefit package	<p>a) for first 10 working days – 100% of salary, depending on the total qualifying period (2014), i.e. persons with a qualifying period of up to 5 years – 60%; with a qualifying period from 5 to 8 years – 80%; with a qualifying period from 8 years or more – 100%;</p> <p>b) from the 11th working day – in the amount of 50 basic rates (Basic rate – 100 KGS).</p> <p>Persons permanently working in mountainous and remote areas – 100 % of wage (income).</p>
Operating and Financing Actors	Individual employers (direct liability system), the Ministry of Labour and Social Development.
Financing	Direct payment by the employer (employer's own resources and state budget starting from 11th day).
Other information	TDB also includes employment injury benefits.

2. Maternity Benefit

Legal framework	<ul style="list-style-type: none"> • Labour Code No.106 “art. 194” (2004); • Law No.33 "On State guarantees and benefits provided to people residing and working in high mountain and hard-to-reach areas" (1996); • Statute No. 727"On the procedure of granting, payment and amount of temporary disability benefit and maternity benefit" (2011); and • Resolution No.1115-111 of the Jogorku Kenesh of the Kyrgyz Republic "On approval of the basic rate" (15 June 2006).
Target group and eligibility	<ol style="list-style-type: none"> a. Pregnant and nursing women, adoptive mother; b. Formally employed individuals, formally unemployed individuals, members of peasant (farm) households, individual entrepreneurs, foreign citizens from EEU countries, who are working in Kyrgyz Republic and contribute (taxes) to the state budget who present a medical certificate (report) of pregnancy, issued in the established order by health organizations.
Benefit package	<p>Amount: 100% of salary for the first 10 working days and in the amount of 10 times of basic rate (1,000 KGS) from the 11th working day. Persons permanently working in the high mountain and hard-to-reach areas receive the benefits in the amount of 100% of salary during the whole period (2014).</p> <p>Period of payment:</p> <ol style="list-style-type: none"> (1) (a) with normal childbirth – 126 days (70 days before the birth and 56 after birth); (b) in case of complicated delivery or the birth of two or more children – 140 days (70 days before the birth and 70 after birth). (2) working in mountainous and remote areas (a) with normal childbirth – 140 days (70 days before and 70 after); (b) in case of complicated delivery – 156 calendar days (70 before and 86 after); (c) the birth of two more children - 180 days (70 days before the birth and 110 after).
Operating and Financing Actors	The individuals’ employer, the Ministry of Labour and Social Development (territorial bodies), the Ministry of Finance.
Financing	Direct payment by the employer (employer’s own resources) for the first ten working days; financing by the state budget starting from the 11th working day).
Other information	Coverage: 37,715 recipients in 2014 (MLSD, 2014).

3. Funeral Grant

Legal framework	<ul style="list-style-type: none"> • Statutory provision No.727 "On the procedure of granting, payment and amount of funeral benefit" (2011); and • Government Decree No.192 "On the amount of average monthly salary to calculate funeral benefit" (2012).
Target group and eligibility	<p>a. Family members of worker who has deceased or third party who carrying out about funerals of deceased worker;</p> <p>b. Beneficiaries can be persons who were previously formally employed or unemployed or who did not work, but resided in Kyrgyz Republic. Includes ormer employees, individual entrepreneurs, members of peasant (farm) households, formally unemployed individuals as well as their family members (dependents), who had paid taxes, or whom the taxes were paid for, and citizens, who did not work, but resided in Kyrgyz Republic.</p>
Benefit package	<p>Depending on the category, percentage of specified average monthly salary (AMS) in 2010 (7,189 KGS), as follows:</p> <p>(1) Employees – 100% of AMS, dependents of employees: 50% of AMS;</p> <p>(2) Individual entrepreneurs, farmers (unincorporated), the unemployed (registered) – 50%, and their dependents – 20% of AMS;</p> <p>(3) beneficiaries of monthly social benefit – 30 times the basic rate; and</p> <p>(4) the unemployed – 20% of AMS.</p>
Operating and Financing Actors	Individual employers, the Ministry of Labour and Social Development, the Ministry of Finance, local self-governments.
Financing	State and local budgets.
Other information	Coverage – 3,583 recipients (in 2014).

4. Free Social Services (for the working age population)

Legal framework	<ul style="list-style-type: none"> • Law no.111 (a.26) "On the basic principles of social services provision to population" (2001).
Target group and eligibility	<p>a. Disabled citizens;</p> <p>b. (1) Free social services are provided to citizens who are unable to carry out the activities of daily living due to illness or disability, living without relatives able to provide corresponding care, and whose average income is below the guaranteed minimum income (810 KGS). (2) Partly paid social services are provided to citizens whose average income exceeds the four times guaranteed minimum income but is less than the subsistence minimum.</p>
Benefit package	Social services include in-home social services, cash benefits, advisory services, and others.

Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Health.
Financing	The state budget.
Other information	<p>Wage of social and health workers in 2013 (NSC): Batken - 8,263 KGS; Jalal-Abad oblast – 8,645 KGS; Issyk-Kul oblast – 8,516 KGS; Naryn – 12,426 KGS; Osh oblast – 8,257 KGS; Talas oblast – 9,132 KGS; Chui oblast – 9,150 KGS; Bishkek – 10,637.2 KGS; Osh – 7,762.9 KGS.</p> <p>Number of social and health workers (in thousands): 2011 – 78.5; 2010 – 74.4; 2009 – 79.4; 2008 – 86.2 (NSC, 2008, 2009, 2011).</p>

5. Unemployment Benefit

Legal framework	<ul style="list-style-type: none"> • Law No. 214 "On the promotion of employment" (1998); and • Statute No.707 "On the procedure and qualifying conditions of registration and payment of unemployment benefits and allowances to unemployed citizens during the period of professional training, retraining and professional development" (1998).
Target group and eligibility	<ol style="list-style-type: none"> a. Unemployed citizens; b. Citizens registered as unemployed with a qualifying period (contributions period) of not less than 12 months.
Benefit package	Unemployment benefit is paid for 6 calendar months of the year at least once a month, but not more than 12 months for three years. Basic unemployment benefits is 250 KGS/per month.
Operating and Financing Actors	The Ministry of Labour and Social Development, The Ministry of Finance.
Financing	The state budget.
Other information	<p>Total number of unemployed in 2015 (MLSD): 205.7 thousand.</p> <p>Number of registered: 91.9 thousand.</p> <p>Number of officially unemployed: 56.7 thousand.</p>

6. Monthly Social Benefit Provided to the Disabled Persons

Legal framework	<ul style="list-style-type: none"> • Law "On State benefits" No. 318 (2009); and • Statute No. 822 "On the procedure of granting of State benefits" (2009).
Target group and eligibility	<ol style="list-style-type: none"> a. Disabled citizens without the right to pension security, and ethnical Kyrgyz people, who came back to the Kyrgyzstan and obtained "Kayrilman" status";

	b. Disabled since childhood of the I, II or III group (level) of disablement without the right to pension security; disabled persons of the I, II or III group of disability without the right to State Social Pension Insurance (SSPI). There is no qualifying period.
Benefit package	Disabled since childhood of the I group – 3,000 KGS, II group – 2,500 KGS, III group – 2,000 KGS; disabled persons of the I group – 2,000 KGS, II group – 1,500 KGS, III group – 1,000 KGS. <i>Note:</i> disability group is level of disablement. <ul style="list-style-type: none"> • First group is highest level of disablement; • Third group is lowest level of disablement.
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Other information	MSB also includes children, mothers who are heroines, the older people.

7. Cash Nutrition Standards in Social Institutions (for working age persons living with disabilities)

Legal framework	<ul style="list-style-type: none"> • Statute No.691 "On social standards with regard to the provision of social services to families and children, as well as to institutions providing social services to children with deprived backgrounds" (October 9, 2012); and • Statute No.7 "Cash nutrition standards in social institutions" (January 15, 2008).
Target group	Disabled persons.
Benefit package	1) For adults in psychoneurological institutions – 100 KGS/day; and 2) for disabled persons in the rehabilitation centres under the Ministry of Labour and Social Development – 100 KGS/day.
Operating and Financing Actors	Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Other information	In 2015, subsistence minimum is 5,799.84 KGS/per month. According to Government Decree No. 694 "On adoption of subsistence minimum structure for main social and age groups in Kyrgyz Republic" (November 6, 2009), cash nutrition standards comprise 61% of the subsistence minimum. Therefore, daily allowances for food should be 117.93 KGS/day $((5,799.84/30 \text{ days}) \times 0.61)$.

8. State Social Survivor Pension Insurance

Legal framework	<ul style="list-style-type: none"> • Law No.57 "On State pension social insurance" (1997).
Target group and eligibility	<ol style="list-style-type: none"> a. Dependents with work incapacities (parents, husband, wife) of deceased insured person; b. Dependents have right to receive this pension, if their deceased breadwinner (insured person) paid contributions for one year up to 23 years old; two years from 23 years old to 26 years old; three years from 26 years old to 31 years old; five years from 31 years old and older.
Benefit package	On 1 st dependent – 50 per cent; 2 – for dependents – 90 per cent; 3-x dependency – 120per cent for 4 or more – 150 per cent of the basic and insurance components of the disability pension of Group II of the breadwinner (for 2014, average amount – 3,202 KGS per month).
Operating and Financing Actors	The Social Fund.
Financing	Contributions and state budget (state provided basic component of 1,500 KGS per month).

9. State Social Disability Pension Insurance (long-term)

Legal framework	<ul style="list-style-type: none"> • Law No.57 "On State pension social insurance" (1997).
Target group and eligibility	<ol style="list-style-type: none"> a. Working age insured persons recognized as disabled; b. Insured citizens, foreign citizens and people without citizenship, residing in the Kyrgyz Republic who are insured in the state pension insurance scheme and paid contributions (qualifying period) for one year up to 23 years old; two years from 23 years old to 26 years old; three years – from 26 years old to 31 years old; five years from 31 years old and older.
Benefit package	<p>The pension amount consist of:</p> <ol style="list-style-type: none"> a) 100 per cent of old-age pension for disabled persons in the I and II groups, and 50 per cent for disabled of the III group; b) Savings within the mandatory individual savings account component. <p>In 2014, the average disability pension was equal to 3,628 KGS per month).</p> <p><i>Note:</i> disability group is level of disablement.</p> <ul style="list-style-type: none"> • First group is highest level of disablement; • Third group is lowest level of disablement.

Operating and Financing Actors	The Social Fund.
Financing	Contributions and the state budget (state provided basic component is 1,500 KGS per month).
Other information	Number of persons who are registered was 106,346 in 2014 (The Social Fund, 2014).

Annex 5: Social protection schemes covering older women and men

1. State Social Pension Insurance (SSPI)

Legal framework	<ul style="list-style-type: none"> • Law No.57 “On State Social Pension Insurance” (1997).
Target group and eligibility	<p>a. Older women at age of 58 years and men at age of 63 years;</p> <p>b. Older dependents of deceased insured person, formally employed individual, member of peasant (farm) households, individual entrepreneur, and foreign citizen from Eurasian Economic Union (EEU) countries who are working in Kyrgyz Republic.</p>
Benefit package	<p>(1) Old-age pension: Target: Persons insured in the pension system. Funding: contributions and state budget. Conditions: Insured persons, including foreign citizens and persons without citizenship, residing in the Kyrgyz Republic. Men aged 63 years and women aged 58 years, who had paid pension contributions for 25 years (for males) and 20 years (for females) for full pension provision. Coverage: 448,597 recipients in 2015 (SF). Average amount: 5,143 KGS per month in 2015.</p> <p>(2) Survivor’s pension: Target: dependents of an insured person in the pension system who has deceased. Funding: contributions and state budget. Conditions: older family members, who do not have the capacity for work and were dependent on a deceased person (parents, husband, wife). The qualifying period of a person deceased at the age of 23 or earlier is equal to one year; from the age of 23 to 26, two years; from the age of 26 to 31, three years; from the age of 31 and up, five years. Amount: for one dependent – 50 per cent; for two dependents – 90 per cent for three dependents – 120 per cent for four and more dependents – 150 per cent of basic and insurance components of the II category disability pension of a breadwinner (in 2015, the average amount was equal to 3,219 KGS per month).</p>
Operating and Financing Actors	The Social Fund.
Financing	<p>Insurance contributions and the state budget.</p> <p>The total contribution rate is 25 per cent of the employees’ wage; 15 per cent is paid by the employer and 10 per cent by the employee (including 2 paid to the mandatory individual savings account).</p>

Other information	The pension consists of a state-provided basic component (which is fixed at 1,500 KZS per month), an insurance component financed through 23 per cent of contributions and mandatory individual savings account component – financing through 2 per cent of contributions paid by an employee.
-------------------	--

2. Military Pension Security

Legal framework	<ul style="list-style-type: none"> • Law No.1194-XII “On pensions provided to military personnel” (1993).
Target group and eligibility	<p>a. Military and law enforcement personnel;</p> <p>b. Persons whose service period at the date of retirement is 20 years. Also included are males who have reached the age of 50 at the date of retirement and have a total qualifying period equal to 25 years (including a service period of not less than twelve years and six months) as well as females who have reached the age of 45 years at the date of retirement and have a total qualifying period equal to 20 years (including a service period of not less than ten years).</p> <p><i>Note:</i> Qualifying period includes all employment periods, (including working period in private and state organizations, military organizations). Service period includes employment period in military organizations only (police, army forces).</p>
Benefit package	For individuals with 20 years of service – 55 per cent of wages. For every year above 20, an additional 3 per cent of wages (but not more than 80 per cent of wage). For those discharged due to old-age or illness – 60 per cent of wages.
Operating and Financing Actors	The Ministry of Defence, the State Committee for National Security, the Ministry of Internal Affairs, the Frontier Service, the Ministry of Justice, the Drug Control Service, the Ministry of Finance, the Ministry of Ecology and Emergency Situations, the Ministry of Transport and Communications, the Social Fund.
Financing	The state budget.

3. Monthly Social Old-Age Benefit

Legal framework	<ul style="list-style-type: none"> • Law No. 318 “On State benefits” (2009); and • Statutes No. 822 “On appointment of the state benefits” and No. 823 “On payment of the state benefits and compensations” (2009).
Target group and eligibility	<p>a. Old-age citizens who have no rights to state social pensions;</p> <p>b. Old-age citizens and ethnical Kyrgyz’s, who came back to the Kyrgyzstan and obtained “Kayrilman” status”, who have no right to state social pension. Men are eligible at the age of 65 and women at the age of 60.</p>

Benefit package	The amount of the benefit is 1000 KGS/per month in 2015.
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Other information	Coverage: 1,824 recipients (MLSD, 2014).

4. Monthly Social Benefit Provided to Mother-Heroines

Legal framework	<ul style="list-style-type: none"> • Law No. 318 “On State Benefits” (2009); and • Statutes No. 822 “On appointment of the state benefits” and No. 823 “On payment of the state benefits and compensations” (2009).
Target group and eligibility	<ol style="list-style-type: none"> a. Mother-heroines who have had more than seven children; b. Mothers with many children (more than seven who are citizens and ethnic Kyrgyzes, who came back to the Kyrgyz Republic and have obtained “Kayrilman” status, and who have no rights to the State Social Pension Insurance. Mothers-heroines receive the right to monthly social benefit at the age of 55 years, while the age of retirement for women is 58 years.
Benefit package	2,000 KGS/ per month in 2015.
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget.
Other information	Coverage: 185 recipients (SF, 2015).

5. Retiree Funeral Grant

Legal framework	<ul style="list-style-type: none"> • Law No. 57 “On state Social Pension Insurance” (1997).
Target group and eligibility	<ol style="list-style-type: none"> a. Family members of older persons who has deceased (citizens) or third party who carrying out about funerals of deceased older person; b. Deceased older persons insured in the pension insurance system (pensioners).

Benefit package	A family of a deceased retiree will receive a funeral grant of a onetime amount equal to a tenfold basic pension component for two weeks after application (lump sum for funeral costs – 15,000 KGS)).
Operating and Financing Actors	The Social Fund.
Financing	Contributions.

6. Free Social Services

Legal framework	<ul style="list-style-type: none"> • Law no. 111 (art. 26) “On the basic principles of social service provision to the population” (2001).
Target group and eligibility	<p>a. Low income older persons living without relatives;</p> <p>b. (1) Free social services are provided to citizens who are unable to carry out the activities of daily living due to old-age, living without relatives able to provide corresponding care. The average income of these citizens must be below the guaranteed minimum income (810 KGS). (2) Partly paid social services are provided to citizens whose average income exceeds the fourfold guaranteed minimum income but is less than the subsistence minimum level.</p>
Benefit package	Social services include the services provided to old-age citizens by residential care facilities, cash assistance, in-home care services.
Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Health.
Financing	The state budget.

7. Cash Nutrition Standards in Social Institutions (for older persons living with disabilities)

Legal framework	<ul style="list-style-type: none"> • Statute No. 691 “On social standards with regard to the provision of social services to families and children, as well as to institutions providing social services to children with deprived backgrounds” (October 9, 2012); • Statute No. 7 “Cash nutrition standards in social institutions” (January 15, 2008).
Target group	Older persons (citizens only) living with disabilities.
Benefit package	For older disabled citizens in general residential care facilities the benefit provides 100 KGS/day.

Operating and Financing Actors	The Ministry of Labour and Social Development, the Ministry of Finance.
Financing	The state budget .
Other information	In 2015, the subsistence minimum is 4,637.23 KGS/month. According to Governmental Decree No. 694 "On adoption of subsistence minimum structure for main social and age groups in Kyrgyz Republic" (November 6, 2009), cash nutrition standards should comprise 70 per cent of the subsistence minimum. Therefore, the daily allowances for food should be 108.20 KGS/day (4,637.23 KGS/30 days) x 0.70).

8. Voluntary State Social Pension Insurance

Legal framework	<ul style="list-style-type: none"> • Law No.57 "On State Social Pension Insurance" (1997); and • Law No.8 "On contribution rates with regard to state social insurance" (2004).
Target group and eligibility	<ol style="list-style-type: none"> a. Older citizens who have contributed to the voluntary pension insurance; b. Voluntary participation. Citizens who have participated in the scheme and has reached the age of retirement (men at the age of 62, women at the age of 58).
Operating and Financing Actors	The Social Fund.
Financing	<p>Personal contributions and investment income earned by the non-state pension fund (funded component).</p> <p>Contribution rates: 8 per cent (or more) of the wage paid to the Pension Fund and/or 2 per cent (or more) of average salary paid to the State Pension Savings Fund</p>



**Scenarios for the implementation
of the national priority:
maternity protection benefit**

Introduction

The purpose of this volume is to introduce ABND working group members to three scenarios for the extension of maternity protection, as calculated by the International Labour Organization.

The calculations are based on the ILO's two-dimensional strategy. Effective national strategy to extend maternity protection was selected as a main priority by the ABND working group (ABND-WG), and in line with national circumstances, should aim at achieving universal protection of the population by ensuring at least minimum levels of income security (horizontal dimension) and progressively ensuring higher levels of protection guided by up-to-date ILO social security standards (vertical dimension). In line with national priorities, resources and circumstances, such two dimensional strategy should aim at building and maintaining comprehensive and adequate maternity protection in the Kyrgyz Republic. The volume will examine different options for extending maternity benefit to women employed in formal and informal sectors, and women outside the labour force ("economically inactive") through high and low scenarios until 2020.

Based on these scenarios Kyrgyz Republic Government can choose different approaches towards reaching the most balanced protection in terms of coverage and adequacy of benefits.

1 Converting recommendations into scenarios suitable for costing

After the matrix is built³⁸, and recommendations are drafted and discussed within the national dialogue, the recommendations are converted into policy options and scenarios suitable for estimating the costs of their implementation.

In the case of the Kyrgyz Republic, as in most of the cases, recommendations could be divided into two different types:

- Related to the expansion of the Social Protection Floors (SPF) – these recommendations can be transformed into scenarios and the cost of the implementation can be estimated using the Rapid Assessment Protocol (RAP) model. For example, some of the scenarios in the Kyrgyz Republic are to increase the level of coverage to cover more people by the existing scheme, to increase the level of benefit (the most common in the most relevant for the country), or to introduce a new non-contributory scheme.
- Other recommendations – they go beyond the Assessment Based National Dialogue (ABND) exercise and require in-depth study (for example, establishment of the unemployment insurance scheme, extension of contributory pension scheme, improvement of social services, targeting mechanism, etc.). In fact, the improvement of social services and the increase of pension benefits were the national priorities for actions chosen by the SPF-Working Group (WG) through ABND in the Kyrgyz Republic, but for further advancement, they require actuarial valuations, and in-depth analysis.

In the Kyrgyz Republic, around twenty one possible scenarios were established based on the recommendations from the matrix, however, several of them were not suitable for estimating the costs with the RAP model since they required in-depth studies and actuarial valuations (such as, increasing the level of pension benefits, introducing an unemployment insurance scheme, improving social services, improving quality of education and increasing the qualification level of healthcare staff etc.). The recommendations that were suitable for using the model were prioritized, from those, maternity and child benefits were chosen as two of the main priorities in the country due to their population being overall

³⁸ The assessment matrix describes the existing social protection system and identifies policy gaps and obstacles for implementing social protection systems in each of the four basic guarantees of the national SPF. A number of recommendations for extending and improving social protection provisions are provided, with the aim of guaranteeing a minimum level of social protection to all. For more detailed information on the matrix development please see Volume 1 of this report.

young, families being composed of large numbers of women who are of childbearing age (described in part 3 of this report) who are employed in the informal sector. Nevertheless, these recommendations and scenarios were selected because they are in line with the government's current priorities for the country and they were strongly supported by the participants of ABND as well.

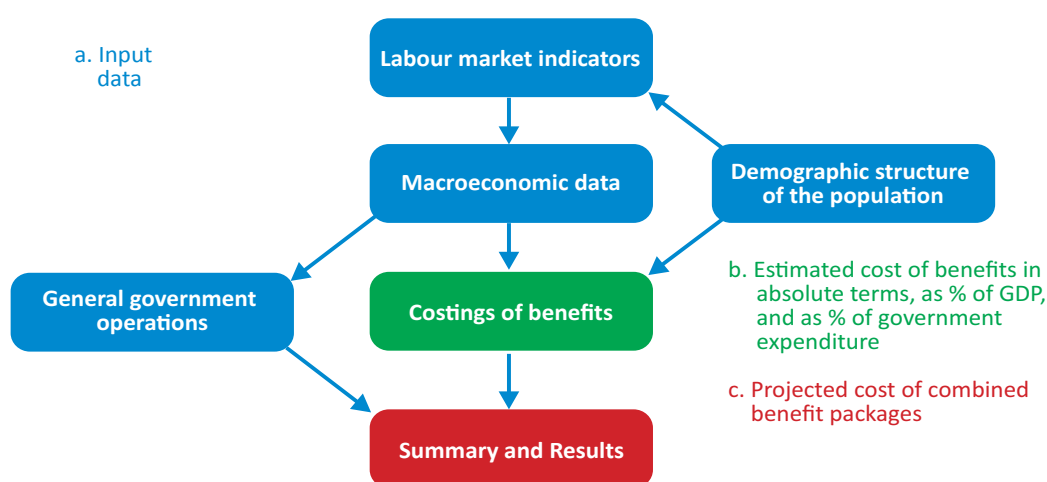
2 Methodology for the financial feasibility and costing tool – RAP model

2.1 Costing

The ILO has a range of financial models and costing tools used to build national statistical reporting systems, conduct actuarial reviews of schemes, economic and budgetary analysis, develop social budget models, and to conduct research on social protection concepts, methodology, and policy issues. The RAP model is one of them, and unlike other models it does not require in-depth training and great experience to use. It provides a quick and simplistic cost estimate for various social protection policy options.

The RAP model forms part of the second step of the ABND exercise. After transforming broad policy recommendations into policy options or scenarios, the costs of proposed social protection provisions are estimated and projected over a five-year period using the ILO RAP model. This costing exercise aims to provide realistic cost estimates to be used for discussions on available fiscal space and government budget reallocations, in turn helping with the prioritization of possible social protection policy options.

Figure 32. Structure of Rapid Assessment Protocol Model



Source: Social protection assessment-based national dialogue: A global guide, February 2016.

Advantages of the RAP model are:

- Simple model to illustrate different policy options;
- Provides a basis to initiate and facilitate national dialogue;
- Long-term sustainability of the programme can be checked by comparing the cost of implementation with economic indicators like GDP and government expenditure;
- Serves as a starting point for extending SPF in the country.

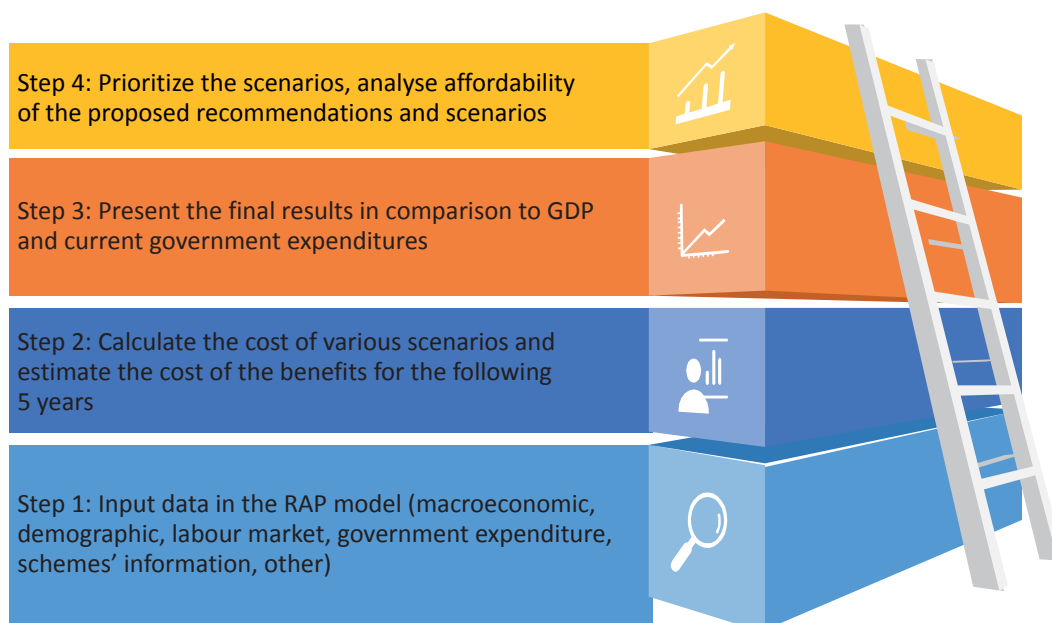
Disadvantages of the model are:

- Results are simplistic and indicative (a lot of assumptions are made);
- Further detailed and actuarial studies are typically needed before designing a new scheme;
- Further legal studies and financial calculations are needed to proceed with the ratification of International Labour Standards.

2.2 Steps to calculate SPF in the Kyrgyz Republic

In order to calculate SPF in the Kyrgyz Republic a four-step approach was used as described below. The steps may overlap depending on the recommendations made by the National Dialogue and the discussions during the technical working group meetings.

Figure 33. Steps to identify affordable SPFs for the Kyrgyz Republic



2.2.1 Step 1: Input data in the RAP model

Five worksheets were completed with statistical data from several sources about the Kyrgyz Republic on their country population, its labour market, economic situation and forecasts, and government operations to create the RAP model. A more detailed description of these five worksheets is listed below, with an additional point on information on 4 social protection guarantees:

- (1) Demographic framework (POP) – Population data per single age, sex and population projections;
- (2) Labour force participation rates (LFPR) and (3) number of persons in the labour force (EAP) were entered by sex and age together with population projections;
- (4) Macroeconomic framework (ECO) – This worksheet provides information about various economic indicators were recorded and projected, including the inflation rate, average monthly wage, minimum wage, poverty line, poverty rate, Gross domestic product (GDP) growth rate, GDP at constant price, GDP at current price, GDP deflator, labour productivity, unemployment rate, and so on. These indicators were used to calculate and project the cost of social protection provisions and to express these cost estimates as a percentage of GDP.
- (5) General government operations (GGO) – The worksheet provides information on the government’s revenues (tax and non-tax) and expenditures. This information will be used to express the cost estimates of the proposed policy options as a percentage of the government’s expenditures and GDP.
- (6) Information for four types of guarantees (health, children, working age and older population) was compiled and presented for various social protection programmes in the country.

a. Sources of data

The amount of data used for ABND in the Kyrgyz Republic is relatively large and the sources of data are various: administrative records of the Ministries, data from population census, household surveys, national accounts, projections of GDP, inflation, poverty, labour force, population and wage statistics. Many sources of information were used and numerous national and international agencies were involved:

- National Statistical Committee data;
- Censuses and surveys;
- Ministries and other governmental agencies;
- National Bank;
- Research Institutions, Universities, etc.;
- Projections and fertility rates were taken from the Ministry of Economics of the Kyrgyz Republic, the United Nations World Population Prospects (UNWPP) and the International Monetary Fund (IMF).

The information for the model was compiled via technical consultations with many national institutions and agencies. To complete the data needs supplemental information

was drawn from several other sources. In these cases, the official information from the National Statistical Committee was given priority.

Some scenarios were chosen based on whether data was available for the cost estimation exercise. When data was not available, reasonable assumptions were formulated to make up for the unavailable data.

b. Assumptions

In the process of designing scenarios, collecting information and making assumptions for cost calculations is done in consultation with actuaries and other specialists in appropriate technical areas. While making assumptions, benefit levels were reasonably linked to the poverty line, national average wage, subsistence minimum or other indicators. Coverage was linked to a relevant percentage of the population and population growth.

2.2.2 Step 2: Calculate the cost of various scenarios

Various scenarios under the different SPF were calculated after all the necessary data was compiled. The cost of each scenario was calculated in absolute terms in the national currency of the Kyrgyz Republic (Kyrgyzstani Som, KGS), and after projected until 2020. The cost of implementing each scenario was calculated using the following formula:

$$Cost = \frac{\text{number of persons in the target group}}{\text{number of persons in the target group}} \times (\text{amount of benefit per person} + \text{administrative costs}^{39})$$

Persons in the target group represent the population covered by a particular scheme among the total population of the country (for example, persons in poverty, women employed in informal sector, women giving birth, etc.). The overall population growth, labour force, and fertility rates were used when projecting the target group through to 2020.

The amount of benefit per person was estimated using different minimum thresholds («floors») based on the national indicators available and used in various national programmes.

National indicators used as minimum thresholds (“floors”):

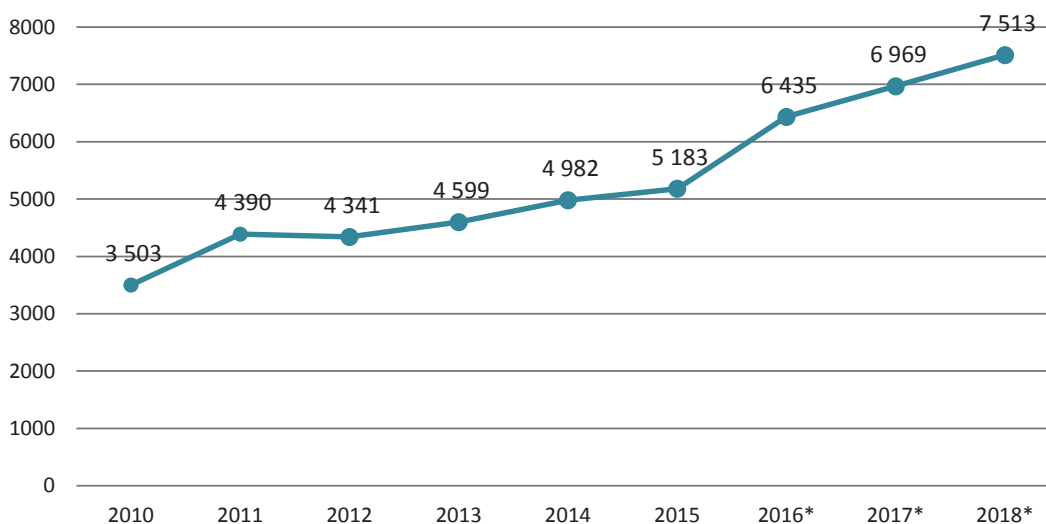
- Guaranteed minimum income (GMI) – an annually adjusted indicator (by the Government) based on budgetary fiscal spaces, economic conditions and subsistence minimum, and it secures a basic income for low-income families with children. Taking into account families’ vulnerability and needs, the GMI is used in adjusting the benefit amounts to be paid to low-income families with children. GMI should be close to the subsistence minimum stated in the legislation (Source: Government

³⁹ While ILO uses 15% of the total cost of benefits as an indicator for administrative costs, the Government may want to revisit this indicator based on the practice used in the country.

decree No. 825, December 2009). The level of GMI as of June 2016 is 805 KGS, which is equal to 11.29 USD⁴⁰;

- Extreme poverty line – an indicator that shows the monetary value of the actual level of food consumption based on household survey results. The minimum required daily calorie intake of 2,100 kcal per person (without taking into consideration a balanced set of nutritious products). Source of data is the Kyrgyz Integrated Household Survey (KIHS);
- Poverty line – an indicator that shows the monetary value of actual level of food consumed (the same as extreme poverty line) and non-food goods’ and services’ consumption deemed necessary to satisfy all basic needs. Source of data is the Kyrgyz Integrated Household Survey (KIHS);
- Subsistence minimum (of a child, old-age and working age persons) – food and non-food or food only – and indicator estimates the monetary value of the minimum set of food and non-food products and services needed for decent living, health and payment of contributions and taxes. The composition of products is different from those used to calculate the poverty lines, as here it is based on a balanced and nutritious set of products, while the poverty line is based on the actual consumption of the household. Source of data is the national law, in the framework of which NSC is estimating the cost of living based on the approved minimum food consumption standards, the living minimum composition for the main socio-demographic groups and the average food prices in each region of the republic in the reference period. The projections until 2018 were provided by the Ministry of Economy (figure 34);

Figure 34. Monthly subsistence minimum per capita from 2010 to 2018, KGS



Source: National Statistical Committee 2010-2015; 2016-2018 – projections of the Ministry of Economy.

⁴⁰ According to the UN Operational Rate of Exchange as of 01 June 2016 (1 USD=71.2918 KGS).

- 66.67 per cent of an average gross wage – this threshold is used specifically for maternity indicators and refers to the requirements of the Maternity Protection Convention, 2000 (No. 183). Source of the average wage is the establishment survey conducted by the NSC, the projections of the average wage were provided by the Ministry of Economy;
- Basic rate equals to 100 KGS – used for calculation of several benefits, for example maternity – 10 basic rates. Basic rate - normative monetary indicator for determining the amount of social benefits, compensations, economic sanctions, administrative penalties and fines, and other economic indicators, which are not associated to wages.

2.2.3 Step 3: Present the final results (cost of several SPF benefits depending on the national priorities)

After calculating the cost of the extending the SPF or coverage of the population in absolute terms, the results were presented as percentage of GDP and the current government expenditure. The general procedure is described in table 1, and the presentation of the final results is shaded in grey.

Table 11. General calculation methodology

Parameter	Current level of benefit and coverage	The level of benefit and coverage the country is aiming to reach
Benefit amount and duration of payment	Current benefit level according to the programme design	Future benefit level based on inflation, wage increase, etc.
Target population	Current number of people in the target group	Future number of people in the target group based on general population growth, growth projections for specific groups
Coverage of the target group	Current coverage of potential beneficiaries	Extension of beneficiary coverage depending on take-up rate
Cost of extending benefits	Current cost calculated using the parameters above	Estimated future cost in absolute numbers, as per cent of GDP, as per cent of government expenditure based on GDP growth rate, forecasted government expenditure

Source: Tables based on the general ABND guidelines.

2.2.4 Step 4: Prioritize the scenarios, analyse affordability of the proposed recommendations and scenarios

After the results were presented and discussed during the second ABND round table, the priorities were chosen by the SPF-WG. Further, the ILO focused on the research and analysis of the affordability of the priority areas for the country based on the consultation with the Ministry of Labour and Social Development (MLSD) (Chapter 3).

3 Financial calculations of increasing the maternity benefit as selected priority by working group members (for each: scenario, assumptions, result and sources of data)

3.1 Current situation and developments

The latest population census in Kyrgyz Republic (2009) showed that 41 per cent of families have three or more children under the age of 18. The average number of persons in the family unit is 5 persons, among families with children – 5.5 persons (see table 12).

There is a large share of families that consist of only one parent (most of the time – mother) they make up 13 percent of all families. The proportions of one parent families vary greatly between urban and rural areas. In urban areas 19 per cent of families are a one parent family, where as in rural areas it is only 9 per cent.

Table 12. Families by number of children and average family size

Families with children:	Number of families, thousand	Average family size
Total	811.3	5.5
With 1 child	236.3	4.0
With 2 children	245.5	5.1
With 3 children	182.2	6.0
With 4 children	95.6	7.2
With 5 and more children	51.7	9.5

Source: NSC

Considering the difficult financial situation of mothers raising children alone, a lot of them move in to live in their parents household – 39 per cent of all single parent families (2009, Population Census). The main reasons for the mothers raising children alone are the following: increasing divorce rates, high mortality of working age men and long periods of labour migration.

Fertility rate has been rapidly increasing in the Kyrgyz Republic since 2000. This is caused mainly by the increase of the number of women between the ages of 20–29, which has the largest amount of births (65 per cent of all births). In 2014 there were 27.7 births per 1000 persons, when in 2010 there were 26.8 births. This is quite a unique situation for the region, as in a lot of CIS countries the number of children in the families is going down, and the population becomes older.

In the Kyrgyz Republic the number of women who are planning to have a child in the near future is very high – on average among all women – 51.1 per cent; 58 per cent among women with 2 children, 43.4 per cent among women with 3 children and around 17 per cent among women with 4 or more children. Therefore, the population in the country stays very young, with a lot of potential for the development of the labour market. (NSC «Уровень жизни населения», 2015)

At the same time, in 2015 employment in the informal sector for women between the ages of 20–29 is one of the highest: 75.8 per cent of women in early twenties (20–24 years old) and 62.2 per cent of women after 25 (25–29 years old). After 30 years old the percentage of women employed in the informal sector is 64.6 per cent. This tendency to work in the informal sector may cause a lot of negative trends in the social protection of young women. (NSC data)

The government is investing a lot in the infrastructure to give women the opportunity to balance family and work life. The number of kindergartens for children under the age of 7 years old increased since 2010, especially in the rural areas (see table 13), and the number of children attending them increased 1.9 times. However, the percentage of children attending the pre-school organisations is still very low, and stays around 19.5 per cent of the total number of children under school age. In urban areas the share of children going to kindergartens is twice higher than in rural areas. Therefore, a lot of mothers stay at home to take care of the children and the family until the children go to school.

Table 13. Number of pre-school institutions – balancing work and family life

	2010	2011	2012	2013	2014	2015
Total number	691	741	819	927	1062	1186
Urban areas	301	308	307	315	341	360
Rural areas	390	433	512	612	721	826

Source: NSC, 2016 Statistical Yearbook.

The opportunity for women to be able to balance work and family life is crucial in the country, as 43.5 per cent of the female population that are of working age is outside of the labour force (economically inactive). The male population it is only 19 per cent. Around 55 per cent of economically inactive women do not want to work due to family responsibilities, when only 7 per cent of inactive men do not want to work due to family responsibilities (NSC, 2015 Statistical yearbook).

In addition, based on the household survey, it takes longer for women to find a job: on average 6–12 months, when for men it takes usually less than 6 months. The number of women in registered unemployment decreased from 33,431 to 30,330 persons, which in fact is only 30 per cent of all unemployed women. The reason for not registering may be the low amount of the unemployment benefit in the country (NSC, 2015 Statistical yearbook). In the last couple of years the gender pay gap has been decreasing, and in 2015 women received 75.5 per cent of men's wage, when in 2010 it was only 63.6 per cent. The difference in wages can be explained by the variations in occupations of women and men. Most women are employed in education or in healthcare. In education, 78.7 per cent of all persons employed are women and in healthcare women make up 84 per cent of all persons employed. Wages in these sectors are lower in comparison to average wages in economy as a whole. However, these occupations very often allow flexible work schedules or part time opportunities.

Maternity protection – current situation

While the duration of maternity leave established currently in the country fulfils the requirement of ILO Convention 102 and 183, the coverage does not reach universality, excluding those in the informal sector and those outside the labour force; and the level of benefit is way below the one prescribed by the international instruments. In 2014, women received on average around 1,832 KGS per month during maternity leave (MLSD, 2015) which is below the required minimum (table 14).

Table 14. Maternity protection in the Kyrgyz Republic

	2010	2011	2012	2013	2014
Number of births	146'123	149'612	154'918	155'520	161'813
Number of beneficiaries of maternity benefits	23'081	21'113	26'493	32'377	37'715
Average size of monthly allowance, KGS:	1'133	1'500	1'961	1'904	1'832
Expenditure, thousand KGS:	104'639	126'687	207'816	246'565	276'384

Source: MLSD data.

Income insecurity during maternity and low levels of benefits often encourages women to return to their job earlier than prescribed in the legislation.

3.2 Policy gaps and recommendations

During the second step of the ABND – development of the matrix – the policy gaps in maternity protection were identified, and the summary of the gaps and recommendations is presented below. For a more detailed analysis of policy gaps please refer to the general ABND report – Volume 1, chapter 3.3.3.

- Legal and policy framework ✓ Insufficient level of provision to women living in non-high mountain area. The amounts of benefit differ greatly for those, who are living in high mountain regions (highlands, flatlands), and those, who are living in the non-high mountain areas.
- Coverage/ Target groups ✓ The informal workers, full-time university students, seasonal workers are not covered by the scheme.

Recommendations

Recommendations and scenarios to address policy gaps

- Legal and policy framework ✓ To increase the benefit and develop financially sustainable Maternity Benefit scheme.
- Coverage/ Target groups ✓ To include new categories of recipients: full-time university students (extra-mural student), seasonal workers, informal employees.

Based on the priorities chosen by SPE-WG through the ABND, possibility of the RAP model use and National Programme priorities, maternity and child protection recommendations were chosen in this report for further development and analysis of the financial feasibility to implement them as a package or one by one. Scenarios based on the recommendations were proposed and discussed by the second National Dialogue.⁴¹

3.3 Scenarios for maternity protection

The following scenarios were built based on the ABND recommendations

Scenario 1: Universal coverage with equal level of benefits for all women (not taking account activity and employment status)	Provide maternity benefit for 3.5 months to all women giving birth at the level of: a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the working group – 3,000 KGS per month
Sub-scenario 1.1: Universal coverage with different levels of benefits depending on the activity status.	Provide maternity benefit for all women giving birth for 3.5 months (1) at the level of subsistence minimum per month for women in employment (both formal and informal) and (2) 1,000KGS per month to unemployed and women outside of labour force.

⁴¹ The 2nd ABND was conducted in the Kyrgyz Republic on 17–19 February 2016. For more details on the ABND please refer to the general ABND report – Volume 1.

Sub-scenario 1.2: Universal coverage with balanced levels of benefits depending on status in employment and economic activity	Provide maternity benefit for 3.5 months to giving birth women in employment: self-employed – at the subsistence minimum; paid employed – 66.67 % of average wage and to those unemployed or outside the labour force – 1,000 KGS.
Scenario 2: Only employed women are covered (excluding unemployed and women outside of labour force)	Provide maternity benefit for all employed women giving birth for 3.5 months (formal + informal, including self-employed) at the level of: a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the working group – 3,000 KGS per month
Sub-scenario 2.1: All employed covered (same target group) but different level of benefits to employed in formal and informal sector	Provide maternity benefit for 3.5 months to giving birth women in employment: formal sector – at the subsistence minimum per month; informal sector – 1,000 KGS per month.
Sub-scenario 2.2: All employed covered (same target group) but different level of benefits to paid employment and self-employed	Provide maternity benefit for 3.5 months to giving birth women in employment: (1) paid employed – 66.67% of average wage per month and (2) self-employed – at the subsistence minimum for adults per month.
Scenario 3 (self-employed are not included): only women in paid employment are covered	Increase maternity benefit up to a) 66.67 % of average wage for 3.5 months for women in paid employment (formal + informally attached to legal enterprises, excluding self-employed) b) scenario suggested by the working group – 3,000 KGS per month

For each of the proposed scenarios, the data were taken from the National Statistical Committee website, publications or handouts provided during the technical mission. The information on level of benefits and the number of beneficiaries was taken from the Social Fund and Ministry of Labour and Social Development, if it was not available on the NSC website. Assumptions for the scenarios were made based on the fertility rates from the UNWPP, population projections from the UNWPP, inflation rates and wage growth from Ministry of Economy of the Kyrgyz Republic up to 2018, from IMF as of 2019.

The tables in this chapter provide simplified calculations, assumptions and categories used, and more detailed information is provided in Annex 1.

3.3.1 Scenario 1 – aiming for universal coverage

The first scenario promotes the universal coverage of the women from 15 to 49 years old (fertile age) regardless of their employment status, level or duration of contributions. This is the approach that should be used to establish social protection floor in the country. The

scenario itself suggests the low and high level of benefits that can be chosen depending on the funds availability in the budget.

Scenario 1 suggests that all the women in the target group (women 15–49) should receive the level of benefit either at the level of subsistence minimum for an adult (high scenario) or at the level of 1,000 KGS (current rate) per month or as suggested by the working group increase to the level of 3,000 KGS. The benefit should be paid for 14 weeks (approximately 3.5 months – as per C183) and should be adjusted to the inflation level. The administrative costs are set at the level of 15 per cent of the total cost of the scenario (this number is standard for all the ABND feasibility studies, however, may be reviewed by the countries based on the evidence from existing schemes and over time).

Scenario 1: Provide maternity benefit over 3.5 months to all women giving birth at two levels; a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month.

Additional scenario was suggested by the working group: to provide maternity benefit over 3.5 months for all women giving birth at the level of 3,000 KGS per month.

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1,529.0	Growth of female population 15–49 (fertile age)	1,586.7	UNWPP (medium scenario)
2	Women giving birth (000s)	159.7	Based on the fertility rates and population growth	162.9	NSC + UNWPP for fertility rates
3	Benefits per head (KGS) – High scenario – at subsistence minimum for working age for 3.5 months Low scenario – 1,000KGS for 3.5 months Scenario suggested by the WG: benefits per head (KGS) – 3000 KGS for 3.5 months	High scenario: 17,989.0 Low scenario: 3,500.0 Scenario suggested by the WG: 10,500.0	Subsistence level will grow + the legislation provides benefits for 14 weeks;	High scenario 29,250.1 Low scenario: 4,705.9 Scenario suggested by the WG: 14,117.6	NSC + MoE (projections) + ILO projections based on inflation (IMF)

		2013	Assumptions	2020	Sources of data
4	Total cost of providing benefits (KGS million)	High scenario: 2,872.6 Low scenario: 558.9 Scenario suggested by the WG: 1,676.7	=2*3	High scenario: 4,765.9 Low scenario: 766.8 Scenario suggested by the WG: 2,300.3	ILO Calculations
5	Admin cost (KGS million) – 15%	High scenario: 430.9 Low scenario: 83.8 Scenario suggested by the WG: 251.5	=4*0.15	High scenario: 714.9 Low scenario: 115.0 Scenario suggested by the WG: 345.0	ILO Calculations
6	Cost of Scenario 1 (KGS million)	High scenario: 3,303.5 Low scenario: 642.7 Scenario suggested by the WG: 1928.2	=5+4	High scenario: 5,480.8 Low scenario: 881.8 Scenario suggested by the WG: 2645.3	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1).

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Subsistence level will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The result of the scenario is presented in millions KGS, however in Annex 1 the information is provided as percentage of GDP (high scenario: 0.93 per cent in 2013 decreasing to 0.73 per cent in 2020; low scenario: 0.18 per cent in 2013 decreasing to 0.12 per cent in 2020; scenario suggested by the working group: 0.5 per cent of GDP in 2013 decreasing to 0.4 per cent in 2020) and percentage of the total government expenditure (high scenario: 2.44 per cent in 2013 decreasing 2.13 per cent in 2020, low scenario: 0.47 per cent in 2013 decreasing to 0.34 per cent in 2020; scenario suggested by the working group: decreasing from 1.4 per cent in 2013 to 1.0 percent in 2020). The decrease in the percentage is explained

by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

The first scenario can be presented with several options for benefits' levels depending on status in employment and in the labour force – sub-scenarios 1.1 and 1.2.

While sub-scenario 1.1 suggests a different level of benefits for women in employment (subsistence minimum) and those who are unemployed or in labour force (1,000 KGS), the sub-scenario still provides the universal coverage for women. The benefit is paid for 3.5 months to all the women giving birth in the target group of women 15–49 years old.

Scenario 1.1: Provide maternity benefit over 3.5 months to all women giving birth(1) at the level of subsistence minimum per month for employed women (both formal and informal) and (2) 1,000 KGS per month to unemployed women and women outside of the labour force

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1,529.0	Growth of female population 15-49 (fertile age)	1586.7	UNWPP (medium scenario)
2	Women giving birth (000s) by attachment to labour force: employed, unemployed and outside the labour force	Employed: 73.8 Unemployed + outside the LF: 82.7	Based on the fertility rates and population growth	Employed: 77.7 Unemployed + outside the LF: 82.5	NSC + UNWPP for fertility rates
3	Benefits per head (KGS) –Employed women – at subsistence level for working age for 3.5 months Unemployed + Outside the LF – 1000KGS for 3.5 months	Employed: 17,989.0 Unemployed + outside the LF: 3,500.0	Subsistence level will grow + the legislation provides benefits for 14 weeks; 1000 adjusted to inflation	Employed: 29,250.1 Unemployed + outside the LF: 4,705.9	NSC + MoE (projections) + ILO projections based on inflation (IMF)
4	Total cost of providing benefits (KGS million)	Employed: 1,328.3 Unemployed + outside the LF: 289.6 Total: 1,617.9	=3*2	Employed: 2,273.0 Unemployed + outside the LF: 388.0 Total: 2,661.0	ILO Calculations

		2013	Assumptions	2020	Sources of data
5	Admin cost (KGS million) – 15%	242.7	=4*0.15	399.2	ILO Calculations
6	Cost of Scenario 1.1 (KGS million)	1860.5	=5+4	3060.2	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1)

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women in employment in total population by age groups will remain the same over the projection period
- Proportion of women in unemployment and outside the labour force in total population by age groups will remain the same over the projection period
- Average wage projections are used for all the ages, when it would be more accurate to have average wage for different age groups
- Subsistence level will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The result shows that the cost of the scenario is 0.52 per cent of GDP in 2013 and decreasing to 0.41 per cent of GDP in 2020; decreasing from 1.37 per cent of the government expenditure in 2013 to 1.19 per cent in 2020 (Annex 1, Volume/Part 2). The decrease in the percentage is explained by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

Sub-scenario 1.2 suggests the most balanced level of benefits for all the women depending on their status in employment and in labour force, providing the benefit of 2/3 of the average wage (66.67 per cent) in the economy to the women in paid employment, subsistence level to the females in self-employment, and 1000KGS to the women in unemployment or outside the labour force. In this sub-scenario the coverage is still set at the universal level.

The benefit is provided for a duration of 3.5 months (C183).

Scenario 1.2: Provide maternity benefit over 3.5 months to all women giving birth who are in employment: self-employed – at the subsistence minimum; paid employed – 66.67 per cent of average wage per month and to those unemployed or outside the labour force – 1,000 KGS per month.

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1529.0	Growth of female population 15–49 (fertile age)	1586.7	UNWPP (medium scenario)
2	Women giving birth (000s) by attachment to labour force: paid employed, self-employed, unemployed and outside the labour force	Paid -employed: 73.8 Self-employed: 33.3 Unemployed + outside the LF: 82.7	Based on the fertility rates and population growth	Paid -employed: 45.5 Self-employed: 34.1 Unemployed + outside the LF: 82.5	NSC + UNWPP for fertility rates
3	Benefits per head (KGS) – Paid employed – 66.67% of avg wage Self-employed – at subsistence level for working age for 3.5 months Unemployed + Outside the LF – 1000KGS for 3.5 months	Paid -employed: 26,463.7 Self-employed: 17,989.0 Unemployed + outside the LF: 3,500.0	Avg wage + Subsistence level will grow + the legislation provides benefits for 14 weeks; 1000 adjusted to inflation	Paid -employed: 46465.0 Self-employed: 29250.1 Unemployed + outside the LF: 4,705.9	NSC + MoE (projections) + ILO projections based on inflation (IMF)
4	Total cost of providing benefits (KGS million)	Paid -employed: 1122.2 Self-employed: 598.2 Unemployed + outside the LF: 289.6 Total: 2010.0	=3*2	Paid -employed: 2113.7 Self-employed: 997.5 Unemployed + outside the LF: 388.0 Total: 3499.2	ILO Calculations
5	Admin cost (KGS million) – 15%	301.5	=4*0.15	524.9	ILO Calculations
6	Cost of Scenario 1.2 (KGS million)	2311.5	=5+4	4024.1	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1).

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women in paid employment and self-employment in total population and total employment by age groups will remain the same over the projection period
- Proportion of women in unemployment and outside the labour force in total population by age groups will remain the same over the projection period
- Average wage projections are used for all the ages, when it would be more accurate to have average wage for different age groups
- Subsistence level will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The results of this sub-scenario are explained in detail in the Annex 1, and show the decrease from 0.65 per cent of GDP in 2013 to 0.54 per cent of GDP in 2020; and a decrease from 1.71 per cent of government expenditure in 2013 to 1.56 per cent in 2020. The decrease in the percentage is explained by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

The provisions of the sub-scenarios can be implemented in their full measure, or separately for women in different types of employment situations.

3.3.2 Scenario 2 – Aiming for coverage of total employment (incl. self-employed and employed in formal and informal sector)

These options provide coverage to all women in employment regardless of their status in employment (paid employed or self-employed), forms of employment (paid or unpaid) and types of main job (main jobs in formal or informal sector). The definition of “employed” used in the national labour force survey is in accordance with the Resolution concerning statistics of work, employment and labour underutilization adopted by 19th International Conference of Labour Statisticians in 2013.

Scenario 2 targets all the women in employment giving birth and providing an equal level of benefits not taking into account the status in employment or forms of employment. There are two options provided: high scenario with a benefit level at the subsistence minimum and low scenario with a level of 1,000 KGS for 3.5 months. In addition, scenario suggested by the working group with the level of benefits at 3,000 KGS for 3.5 months is presented in the

table. The benefit level should be adjusted in line with price inflation. The administrative costs are set at the level of 15 per cent of the total cost of the scenario (this number is standard for all the ABND feasibility studies, however, may be reviewed by the countries based on the evidence from existing schemes and over time).

Scenario 2: Provide maternity benefit over 3.5 months for all employed women giving birth (formal + informal, including self-employed) at the level a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) Scenario suggested by the WG – 1,000 KGS per month.

Additional scenario suggested by the working group: Provide maternity benefit over 3.5 months for all employed women giving birth (formal + informal, including self-employed) at the level of 3,000 KGS per month.

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1529.0	Growth of female population 15–49 (fertile age)	1586.7	UNWPP (medium scenario)
2	Women in employment 15–49 (000s)	741.3	Growth of number of women in employment (based on pop. growth)	785.7	NSC + ILO projections
3	Women in employment giving birth (000s)	73.8	Based on the fertility rates and population growth	77.7	NSC + UNWPP for fertility rates
4	Benefits per head (KGS) – High scenario: at the level of subsistence level for 3.5 months Low scenario: benefits per head (KGS) – 1000 KGS for 3.5 months Scenario suggested by the WG: benefits per head (KGS) – 3000 KGS for 3.5 months	High scenario: 17989.0 Low scenario: 3500 Scenario suggested by the WG: 10500.0	Avg wage will grow + the legislation provides benefits for 14 weeks	High scenario: 29250.1 Low scenario: 4705.9 Scenario suggested by the WG: 14117.6	NSC + MoE (projections) + ILO projections based on inflation (IMF)

		2013	Assumptions	2020	Sources of data
5	Total cost of providing benefits (KGS million)	High scenario: 1328.3 Low scenario: 258.4 Scenario suggested by the WG: 775.3	=4*3	High scenario: 2273.0 Low scenario: 365.7 Scenario suggested by the WG: 1097.1	ILO Calculations
6	Admin cost (KGS million) – 15%	High scenario: 199.2 Low scenario: 38.8 Scenario suggested by the WG: 116.3	=5*0.15	High scenario: 341.0 Low scenario: 54.9 Scenario suggested by the WG: 164.6	ILO Calculations
7	Cost of Scenario 2 (KGS million)	High scenario: 1527.6 Low scenario: 297.2 Scenario suggested by the WG: 891.6	=5+6	High scenario: 2614.0 Low scenario: 420.5 Scenario suggested by the WG: 1261.6	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1).

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women in employment in total population by age groups will remain the same over the projection period
- Subsistence minimum will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The result shows that, under this scenario, the benefit cost is 0.43 per cent of GDP in 2013 decreasing to 0.35 per cent of GDP in 2020, and it is 1.13 per cent of government expenditure in 2013 decreasing to 1.01 per cent in 2020 (high scenario); 0.08 per cent of GDP in 2013 decreasing to 0.06 per cent in 2020 and 0.22 per cent of government

expenditure in 2013 decreasing to 0.16 per cent in 2020 (low scenario); 0.25 per cent of GDP and 0.66% of government expenditure in 2013 decreasing to 0.17 per cent of GDP and 0.49 per cent of the government expenditure in 2020 . (Annex 1). The decrease in the percentage is explained by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

Two sub-scenarios provided below still target employed women at the age of 15–49, however suggest different benefit level depending on their status in employment or type of main job (formal or informal).

Sub-scenario 2.1 provides for a benefit at the level of subsistence minimum for 3.5 months to pregnant women employed in formal sector and at the level of 1,000KGS to those employed in informal sector. In order to avoid double-counting, only main jobs were taken into account, therefore, if the women were employed in formal sector as their main job and at the same time in informal sector as their secondary job, they would be considered as employed in formal sector.

Scenario 2.1: Provide maternity benefit over 3.5 months for all employed women giving birth: formal sector – at the subsistence minimum for adults per month; informal sector – 1,000 KGS per month.

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1529.0	Growth of female population 15–49 (fertile age)	1586.7	UNWPP (medium scenario)
2	Women in employment 15–49 (000s)	741.3	Growth of number of women in employment (based on pop. growth)	785.7	NSC + ILO projections
3	Women in employment giving birth (000s) – formal and informal sector	Informal: 49.7 Formal: 24.1	Based on the fertility rates and population growth	Informal: 51.7 Formal: 26.0	NSC + UNWPP for fertility rates

		2013	Assumptions	2020	Sources of data
4	Benefits per head (KGS) – Formal sector: at the level of subsistence level for 3.5 months Informal sector: benefits per head (KGS) – 1000 KGS for 3.5 months	Formal: 17989.0 Informal: 3500	Avg. wage will grow + the legislation provides benefits for 14 weeks	Formal: 29250.1 Informal: 4705.9	NSC + MoE (projections) + ILO projections based on inflation (IMF)
5	Total cost of providing benefits (KGS million)	Formal: 434.4.0 Informal: 173.9 Total: 608.3	=4*3	Formal: 760.9 Informal: 243.3 Total: 1004.2	ILO Calculations
6	Admin cost (KGS million) – 15%	91.3	=5*0.15	150.6	ILO Calculations
7	Cost of Scenario 2.1 (KGS million)	699.6	=5+6	1154.8	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1).

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women employed in formal/informal sector in total population and total employment by age groups will remain the same over the projection period
- Proportion of women in unemployment and outside the labour force in total population by age groups will remain the same over the projection period
- Subsistence level will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The cost of this sub-scenario is decreasing from 0.20 per cent of GDP in 2013 to 0.15 per cent of GDP in 2020; 0.52 per cent of the government expenditure in 2013 to 0.45 per cent in 2020. The decrease of the percentage is explained by the rapid growth of GDP and

expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

The sub-scenario 2.2 suggests the provision of different benefit levels to women in paid and self-employment. Women who are in paid employment are entitled to a benefit at the level of 2/3 of the average wage (C183) – generally, to provide this level of benefit the implementation of the contributory scheme is recommended (persons in paid employment usually contribute to the Social Fund and Compulsory health insurance Fund); while women in self-employment are entitled to the benefit at the level of subsistence minimum. The benefit should be provided for a duration of 3.5 months (C183).

Scenario 2.2: Provide maternity benefit over 3.5 months for all employed women giving birth: (1) paid employed – 66.67 per cent of average wage per month and (2) self-employed – at the subsistence minimum per month.

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1,529.0	Growth of female population 15–49 (fertile age)	1,586.7	UNWPP (medium scenario)
2	Women in employment 15–49 (000s)	741.3	Growth of number of women in employment (based on pop. growth)	785.7	NSC + ILO projections
3	Women in employment giving birth (000s) paid employment and self-employment	Self-employed: 33.3 Paid employed: 42.4	Based on the fertility rates and population growth	Self-employed: 34.1 Paid employed: 45.5	NSC + UNWPP for fertility rates
4	Benefits per head (KGS) – Self-employed: at the level of subsistence minimum for 3.5 months Paid employed: benefits per head (KGS) – 66.67% of the average wage for 3.5 months	Self-employed: 17,989.0 Paid employed: 26,463.7	Avg. wage will grow + the legislation provides benefits for 14 weeks	Self-employed: 29,250.1 Paid employed: 46,465.0	NSC + MoE (projections) + ILO projections based on inflation (IMF)

		2013	Assumptions	2020	Sources of data
5	Total cost of providing benefits (KGS million)	Self-employed: 598.2 Paid employed: 1,122.2 Total: 1720.4	=4*3	Self-employed: 997.5 Paid employed: 2,113.7 Total: 3111.2	ILO Calculations
6	Admin cost (KGS million) – 15%	258.1	=5*0.15	466.7	ILO Calculations
7	Cost of Scenario 2.2 (KGS million)	1978.5	=5+6	3577.9	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1)

The following assumptions were made in order to calculate this scenario:

- Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women in paid employment and self-employment in total population and total employment by age groups will remain the same over the projection period
- Average wage projections are used for all the ages, when it would be more accurate to have average wage for different age groups
- Subsistence level will be adjusted in line with price inflation
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The benefit cost under this sub-scenario decreases from 0.56 per cent of GDP in 2013 to 0.48 per cent of GDP in 2020; 1.46 per cent of the government expenditure in 2013 to 1.39 per cent in 2020. The decrease in the percentage is explained by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time.

The provisions in the sub-scenarios can be implemented in their full measure, or separately for women in different types of employment situations.

3.3.3 Scenario 3 – aiming for providing the benefit to women in paid employment (excl. self-employed) – C183

Scenario 3 fully follows the level of benefits required by the Convention 183 on Maternity Protection, which is the high level ILO Convention on maternity protection. The Kyrgyz Republic is considering the future ratification of this Convention and the reporting on the level of benefits will be one of the major tasks of the country. While the requirements of the Convention regarding coverage are fulfilled (more information regarding coverage of atypical forms of work is needed), the level of the benefit is not adequate enough to reach the level of C183.

This scenario is focusing on the pregnant women in paid employment only – this can also be seen as the part of sub-scenarios 1.2 and 2.2. The benefit is provided at the level of 2/3 of the average wage in the economy for 3.5 months. The benefit level should be adjusted to the inflation level. The administrative costs are set at the level of 15 per cent of the total cost of the scenario (this number is standard for all the ABND feasibility studies, however, may be reviewed by the countries based on the evidence from existing schemes and over time). In addition, scenario suggested by the working group is presented in the in the table – 3,000KGS per month, and it could serve as an intermediate step towards the goal amount.

Scenario 3: Increase maternity benefit up to a) 66.67% of average wage per month over 3.5 months for women in paid employment (formal + informally attached to legal enterprises, excluding self-employed) b) scenario suggested by the WG – 3,000 KGS per month.

Additional scenario suggested by the working group: Increase maternity benefit up to 3000 KGZ per month over 3.5 months for women in paid employment (formal + informally attached to legal enterprises, excluding self-employed).

		2013	Assumptions	2020	Sources of data
1	Population – women 15–49 (000s)	1,529.0	Growth of female population 15–49 (fertile age)	1,586.7	UNWPP (medium scenario)
2	Women in employment 15–49 (000s)	408.0	Growth of number of women in paid employment (based on pop. growth)	441.8	NSC
3	Women in paid employment giving birth (000s)	43.3	Based on the fertility rates and population growth	45.5	NSC + UNWPP for fertility rates

3. Financial calculations of increasing the maternity benefit

		2013	Assumptions	2020	Sources of data
4	Benefits per head (KGS) – at 66.67% of average wage for 3.5 months Scenario suggested by the WG: Benefits per head (KGS) – 3000 KGS for 3.5 months	28,666.4 Scenario suggested by the WG: 10500.0	Avg wage will grow + the legislation provides benefits for 14 weeks	46,465.0 Scenario suggested by the WG: 14117.6	NSC + MoE (projections) + ILO projections based on inflation (IMF)
5	Total cost of providing benefits (KGS million)	1,240.2 Scenario suggested by the WG: 445.3	=4*3	2,113.7 Scenario suggested by the WG: 642.2	ILO Calculations
6	Admin cost (KGS million) – 15%	186.0 Scenario suggested by the WG: 66.8	=5*0.15	317.1 Scenario suggested by the WG: 96.3	ILO Calculations
7	Cost of Scenario 3 (KGS million)	1,426.2 Scenario suggested by the WG: 512.0	=5+6	2,430.7 Scenario suggested by the WG: 738.5	ILO Calculations

Note: all the estimates and projections for employment and women giving birth were made by age groups to receive more accurate data (for more details, please see Annex 1). 2014 was used as a base year for this scenario due to the data availability.

- The following assumptions were made in order to calculate this scenario: Population growth during projection period can be described by the medium scenario in UNWPP
- Age-specific fertility rates (national data) are projected based on the medium scenario of population growth (UNWPP)
- Age-specific fertility rates for specific groups (employed, unemployed, etc.) will remain growing in line with the number of population in the respective group
- National legislation will provide a benefit for 14 weeks as prescribed in the C183
- Proportion of women in paid employment in total population and total employment by age groups will remain the same over the projection period
- Average wage projections are used for all the ages, when it would be more accurate to have average wage for different age groups
- GDP and Government expenditure are based on IMF projections
- Administrative costs will take up to 15 % of the total cost of providing benefits
- The assumption is made that it is feasible to have a take-up rate at 100%, as the scheme already exists.

The results of this scenario show that the level changes from 0.36 per cent of GDP in 2013 to 0.33 per cent in 2020; 0.95 per cent of the government expenditure in 2013 to 0.94 per cent in 2020. The results of the scenario suggested by the working group shows that the cost decreases from 0.14 per cent of GDP in 2013 to 0.10 percent in 2020; and decreases from 0.38 per cent of the government expenditure in 2013 to 0.29 per cent in 2020. The decrease in the percentage is explained by the rapid growth of GDP and expenditure comparing to a lower growth of inflation in the next couple of years (therefore as denominator grows faster, the percentage of spent on benefits appears lower). It is noted that in absolute numbers the benefit cost under this scenario grows over time. The drop in the percentage is not as visible as in other scenarios due to the projected rapid growth of the average wage in the economy.

4 Definition and cost of a Social Protection Floor for maternity benefit in the Kyrgyz Republic

After reviewing the cost estimates of the different options of maternity protection benefits aimed at providing decent level of guarantees to all women in the Kyrgyz Republic, it can be concluded that the Government can choose different approaches towards reaching the most balanced protection in terms of coverage and adequacy of benefits.

Table 15 represents different levels of coverage ranging from only paid employment (contributing) to universality, suggesting different levels of benefits for each of the groups depending on the labour market status.

Table 15. Options of level of maternity benefit coverage in the Kyrgyz Republic

Suggested scenarios	Coverage – women 15–49 years old	Level of benefit – periodic payments for 3.5 months
Scenario 1 – Universality	All women – both in self-employment and paid employment, unemployed and outside the labour force	1. a) high scenario – subs. level b) low scenario – 1,000KGS c) scenario suggested by the working group – 3,000 KGS per month 1.1 employed – subs. level, unemployed + inactive – 1000KGS 1.2 self-employed – subs. level; paid emp. – 2/3 of the average wage; unemployed + inactive – 1000KGS
Scenario 2 – Employed only	Only employed women – both in self-employment and paid employment (not including unemployed and persons outside the labour force)	2. a) high scenario – subs. level b) low scenario – 1,000KGS (current level) c) scenario suggested by the working group – 3,000 KGS per month 2.1 formal sector – subs. level; informal sector – 1,000KGS 2.2 self-emp. – subs. level; paid-emp. – 2/3 of the average wage
Scenario 3 – Paid employed only	Only paid employed women – pay contributions	3. a) 2/3 of the average wage (C183) b) scenario suggested by the working group – 3,000 KGS per month

As table 15 shows, the provided options give the opportunity to fulfil the obligations of the Maternity Protection Convention, 2000 No. 183 (C183) on the level of benefits for maternity protection under scenario 3; up to the higher coverage of the target group of women 15–49 years old (sub-scenarios 2.2 adds those in self-employment and 1.2 goes beyond employment and adds women in unemployment and outside the labour force bringing universal approach).

The cost of social protection floor on maternity protection varies depending on the level of benefit that the country would be willing to provide, and to what extent it is willing to increase the coverage to women in self-employment and those unemployed and outside the labour force.

Figure 35. Cost of different options to extend maternity protection coverage to self-employed, employed in informal sector and those unemployed and outside of the labour force, 2020

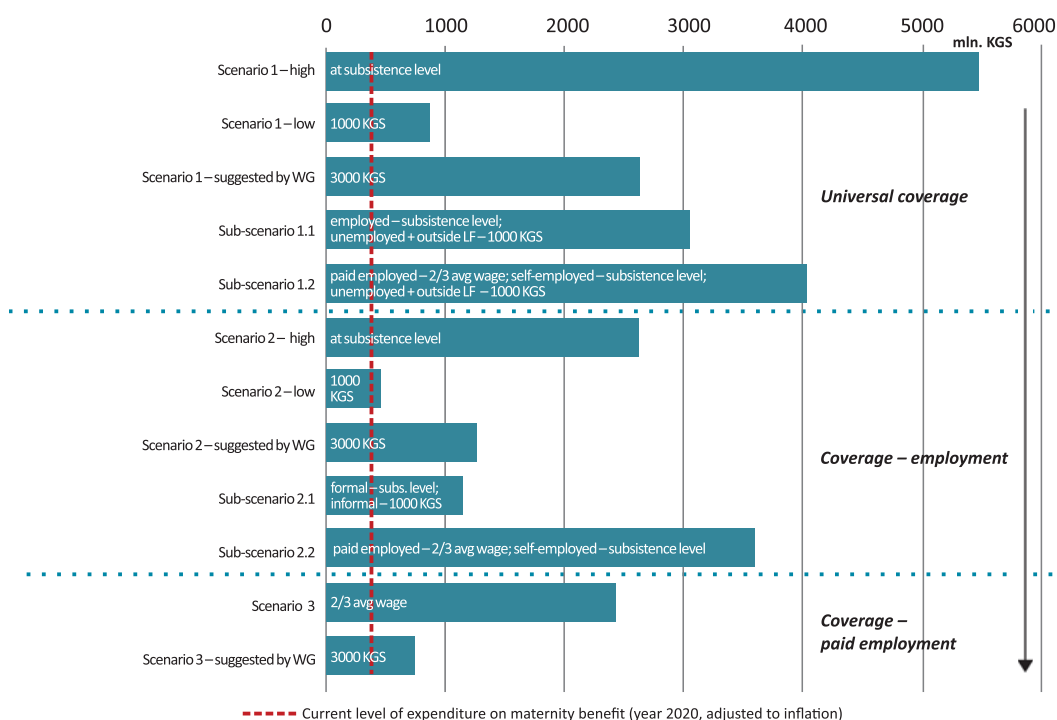


Figure 35 shows the cost of different scenarios depending on the coverage and different level of benefits paid to different groups for 3.5 months in year 2020. It is important to bear in mind that the costs presented in this report are rough estimations based on statistical data and a set of strong assumptions. It is important to consider such costs as a guiding figure which gives an indication of the cost of implementing such benefits. Nevertheless, further studies based on more accurate data should be done once the proposed benefit options are effectively implemented.

As shown on the graph, scenario 2 – low is almost accomplished as this programme for maternity protection is already in place – non-contributory maternity benefit for women in employment. However, it would be necessary for the Government to consider establishing

a contributory scheme in order to reach higher level of benefits, ideally to sub-scenario 2.2, with contributory benefit as prescribed by the C183 – 2/3 of the average wage to women in paid employment, and subsistence minimum to those in self-employment for non-contributory benefit. In order to achieve the universal coverage, the non-contributory scheme should be extended to those in unemployment and outside of labour force, in the way it is laid out in sub-scenario 1.2.

Nevertheless, the establishment of a contributory scheme may require additional funding, administrative support and time, therefore, the country may decide to start with extending the coverage for maternity benefit to reach universality without raising the benefit level at the same time, the way it is suggested in Scenario 1 – low. At a later stage it should be decided to raise the level of benefit for all the women in an equal manner disregarding the labour force status (Scenario 1- high with possible several intermediary steps).

However, the Government should take into account that increasing the benefit level without consideration of the labour status (i.e. disregarding the contributions of paid employed persons) may discourage people to participate in contributory schemes. Therefore, another option would be to increase the level of benefits depending on the status in the labour market (sub-scenarios 1.1 and potentially 1.2). This approach would allow to achieve universal coverage relatively fast under R202; and in the future, increase the level of benefits and reach the level of C183.

Technical working group discussed suggested scenarios, and decided that it will be relevant to define short-term and long-term perspectives to achieve the most balanced result. The scenarios that were selected as priorities include increasing the level of maternity benefit up to 3000 KGS and extending coverage to self-employed at first, and progressively extend the coverage to all the women reaching universality. The working group decided that the country should move in the following direction:

- by 2022 (a) to improve the coverage of formal workers, farmers and self-employed and (b) to increase the benefit level based on inflation or up to 3,000 KGZ;
- by 2030 (a) to extend the coverage to informal workers and (b) to increase the benefit level up to subsistence minimum;
- by 2040 (a) to cover all women and (b) to increase the benefit level for women in paid employment up to 2/3 of average or previous wage.

These options are included in the calculations of scenario 1, 2 and 3 in chapter 3. Further studies should be focused on extending projections with more details up to 2040 in line with the goals of country development. In addition, a comprehensive research is needed to include the cost of the Government spent on maternity health protection as this is an important part of maternity protection and should be included in further projections.

All the options should be discussed in a national dialogue determining the priorities for the country under R202. As the calculations in this chapter are indicative of the current situation, they require further detailed and actuarial studies before designing a scheme. In addition, further legal studies and financial calculations are needed to proceed with the ratification of International Labour Standards, such as C183 and potentially C102.

Annex

Annex I

Scenario 1: Universal coverage with equal levels of benefits for everyone (the same level of benefits disregarding the sector or status in employment / labour force)

Scenario 1: : Provide maternity benefit over 3.5 months to all women giving birth at two levels; a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									
Total women 15–49 (000s)	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s)	159.7	161.8	163.9	165.0	165.2	165.1	164.4	162.9	0.10487
<20 years	11.6	11.4	11.0	10.5	10.2	9.9	9.8	9.8	0.04266

Part 2. Scenarios for the implementation of the national priority: maternity protection benefit

Scenario 1 (continued): Provide maternity benefit over 3.5 months to all women giving birth at two levels; a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
20–24 years	58.4	57.4	56.8	54.2	52.8	51.6	50.3	48.7	
25–29 years	46.3	48.5	50.2	52.8	52.2	50.9	49.4	47.9	
30–34 years	26.6	27.4	28.8	30.3	32.5	34.9	36.8	37.8	
35–49 years	16.9	17.0	17.2	17.2	17.4	17.7	18.2	18.6	
Amount of benefits and expenditure									
High scenario: benefits per head (KGS) – at the level of subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
Low scenario: benefits per head (KGS) – 1000 KGS for 3.5 months	3,500.0	3,500.0	3,500.0	3,772.3	4,010.8	4,230.3	4,461.7	4,705.9	
Scenario suggested by the WG: benefits per head (KGS) – 3000 KGS for 3.5 months	10,500.0	10,500.0	10,500.0	11,317.0	12,032.4	12,690.8	13,385.2	14,117.6	
High scenario: total cost of providing benefits (KGS million)	2,872.6	3,150.7	3,328.0	3,716.0	4,029.0	4,341.2	4,558.9	4,765.9	
Low scenario: total cost of providing benefits (KGS million)	558.9	566.3	573.8	622.4	662.5	698.4	733.5	766.8	
Scenario suggested by the WG: total cost of providing benefits (KGS million)	1,676.7	1,699.0	1,721.4	1,867.2	1,987.6	2,095.3	2,200.4	2,300.3	
High scenario: admin cost (KGS million) – 15%	430.9	472.6	499.2	557.4	604.4	651.2	683.8	714.9	
Low scenario: admin cost (KGS million) – 15%	83.8	85.0	86.1	93.4	99.4	104.8	110.0	115.0	
Scenario suggested by the WG: admin cost (KGS million) – 15%	251.5	254.9	258.2	280.1	298.1	314.3	330.1	345.0	

Scenario 1 (continued) : Provide maternity benefit over 3.5 months to all women giving birth at two levels; a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Cost of the scenario									
High scenario: total cost (KGS million)	3,303.5	3,623.3	3,827.2	4,273.3	4,633.4	4,992.4	5,242.7	5,480.8	
Low scenario: total cost (KGS million)	642.7	651.3	659.9	715.8	761.9	803.2	843.5	881.8	
Scenario suggested by the WG: total cost (KGS million)	1,928.2	1,953.9	1,979.6	2,147.3	2,285.7	2,409.6	2,530.4	2,645.3	
High scenario: cost as % of GDP	0.93%	0.91%	0.86%	0.86%	0.83%	0.80%	0.76%	0.73%	
Low scenario: cost as % of GDP	0.18%	0.16%	0.15%	0.14%	0.14%	0.13%	0.12%	0.12%	
Scenario suggested by the WG: cost as % of GDP	0.5%	0.5%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	
High scenario: cost as % of Govt. expenditure	2.44%	2.55%	2.21%	2.26%	2.23%	2.28%	2.24%	2.13%	
Low scenario: cost as % of Govt. expenditure	0.47%	0.46%	0.38%	0.38%	0.37%	0.37%	0.36%	0.34%	
Scenario suggested by the WG: cost as % of Govt. expenditure	1.4%	1.4%	1.1%	1.1%	1.1%	1.1%	1.1%	1.0%	

Sub-scenario 1.1: Universal coverage with a possibility of an intermediate scenario with different level of benefits for employed and unemployed or persons outside the labour force (inactive)

Scenario 1.1: Provide maternity benefit over 3.5 months to all women giving birth (1) at the level of subsistence minimum per month for employed women (both formal and informal sector) and (2) 1,000 KGS per month to unemployed women and women outside of the labour force									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									
Total women 15–49 (000s)	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s) – by attachment to labour force – employed (formal and informal, main job only)	73.8	75.2	76.5	77.6	78.0	78.3	78.2	77.7	0.10487
<20 years	1.9	1.9	1.8	1.8	1.7	1.7	1.6	1.6	0.04266
20–24 years	22.9	22.5	22.3	21.3	20.7	20.2	19.7	19.1	0.19973
25–29 years	24.0	25.2	26.1	27.5	27.2	26.5	25.7	24.9	0.17746
30–34 years	14.1	14.5	15.2	16.0	17.2	18.4	19.4	20.0	0.13164
35–49 years	10.9	11.0	11.1	11.1	11.3	11.5	11.7	12.1	0.03361
Women giving birth (000s) – by attachment to labour force – unemployed and outside of the labour force	82.7	83.6	84.5	84.6	84.4	84.0	83.4	82.5	0.10487

Scenario 1.1 (continued): Provide maternity benefit over 3.5 months to all women giving birth (1) at the level of subsistence minimum per month for employed women (both formal and informal sector) and (2) 1,000 KGS per month to unemployed women and women outside of the labour force									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
<20 years	9.3	9.1	8.8	8.4	8.1	7.9	7.8	7.8	0.04266
20–24 years	32.3	31.8	31.5	30.0	29.3	28.6	27.8	27.0	0.19973
25–29 years	23.4	24.6	25.4	26.7	26.4	25.8	25.0	24.2	0.17746
30–34 years	11.9	12.3	12.9	13.5	14.5	15.6	16.5	16.9	0.13164
35–49 years	5.9	5.9	6.0	6.0	6.1	6.2	6.3	6.5	0.03361
Amount of benefits and expenditure									
Benefits per head (KGS) to all employed women – at the level of subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
Benefits per head (KGS) to all unemployed and outside of the labour force – 1000 KGS for 3.5 months	3,500.0	3,500.0	3,500.0	3,772.3	4,010.8	4,230.3	4,461.7	4,705.9	
(1) Total cost of providing benefits to employed women (KGS million)	1,328.3	1,463.7	1,553.4	1,747.7	1,903.5	2,059.1	2,169.2	2,273.0	
(2) Total cost of providing benefits to unemployed women and women outside of the labour force (KGS million)	289.6	292.7	295.6	319.2	338.5	355.4	372.0	388.0	
Total cost of providing benefits to all women (KGS million) = (1) + (2)	1,617.9	1,756.4	1,849.0	2,066.9	2,241.9	2,414.5	2,541.3	2,661.0	
Admin cost (KGS million) – 15%	242.7	263.5	277.3	310.0	336.3	362.2	381.2	399.2	
Cost of the scenario									
Cost of the scenario (KGS million)	1,860.5	2,019.9	2,126.3	2,376.9	2,578.2	2,776.7	2,922.5	3,060.2	
Cost as % of GDP	0.52%	0.51%	0.48%	0.48%	0.46%	0.45%	0.43%	0.41%	
Cost as % of Govt. expenditure	1.37%	1.42%	1.23%	1.26%	1.24%	1.27%	1.25%	1.19%	

Sub-scenario 1.2: The most balanced in payments and full in terms of coverage sub-scenario. Universal coverage with different levels of benefits: paid employment – 66.67% of average wage, self-employed – subsistence minimum, unemployed and persons outside the labour force (inactive) – 1,000 KGS

Scenario 1.2: Provide maternity benefit over 3.5 months to all women giving birth who are in employment: : self-employed – at the subsistence minimum; paid employed – 66.67 per cent of average wage per month and to those unemployed or outside the labour force – 1,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									
Total women 15–49 (000s)	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s) – paid employment	42.4	43.3	44.2	44.9	45.4	45.7	45.7	45.5	0.10603
<20 years	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.04266
20–24 years	12.3	12.1	11.9	11.4	11.1	10.8	10.6	10.2	0.19973
25–29 years	14.2	14.9	15.4	16.2	16.0	15.6	15.2	14.7	0.17746
30–34 years	9.6	9.9	10.3	10.9	11.7	12.6	13.2	13.6	0.13164
35–49 years	5.9	6.0	6.1	6.1	6.1	6.3	6.4	6.6	0.03361
Women giving birth (000s) – self-employment	33.3	33.7	34.2	34.5	34.5	34.5	34.4	34.1	0.10487
<20 years	1.6	1.5	1.5	1.4	1.4	1.3	1.3	1.3	0.04266
20–24 years	11.8	11.6	11.4	10.9	10.6	10.4	10.1	9.8	0.19973

Scenario 1.2 (continued): Provide maternity benefit over 3.5 months to all women giving birth who are in employment: : self-employed – at the subsistence minimum; paid employed – 66.67 per cent of average wage per month and to those unemployed or outside the labour force – 1,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
25–29 years	9.8	10.3	10.6	11.2	11.1	10.8	10.5	10.1	0.17746
30–34 years	5.1	5.2	5.5	5.8	6.2	6.6	7.0	7.2	0.13164
35–49 years	5.1	5.1	5.2	5.2	5.2	5.3	5.5	5.6	0.03361
Women giving birth (000s) – in unemployment and outside of the labour force	82.7	83.6	84.5	84.6	84.4	84.0	83.4	82.5	0.10414
<20 years	9.5	9.3	9.1	8.8	8.4	8.1	7.9	7.8	0.04151
20–24 years	32.6	32.3	31.8	31.5	30.0	29.3	28.6	27.8	0.19050
25–29 years	22.2	23.4	24.6	25.4	26.7	26.4	25.8	25.0	0.17774
30–34 years	11.4	11.9	12.3	12.9	13.5	14.5	15.6	16.5	0.12648
35–49 years	5.8	5.9	5.9	6.0	6.0	6.1	6.2	6.3	0.03324
Amount of benefits and expenditure									
Benefits per head (KGS) to all women in paid employment at the level of 66.67% of average wage (C183) for 3.5 months	26,463.7	28,666.4	31,034.9	34,768.4	38,268.6	41,768.8	44,054.3	46,465.0	
Benefits per head (KGS) to all self-employed women at the subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
Benefits per head (KGS) to all women in unemployment and outside of the labour force – 1000KGS	3,500.0	3,500.0	3,500.0	3,772.3	4,010.8	4,230.3	4,461.7	4,705.9	
(1) Total cost of providing benefits to employed women in paid employment (KGS million)	1,122.2	1,240.2	1,370.3	1,562.8	1,735.9	1,907.4	2,014.5	2,113.7	
(2) Total cost of providing benefits to employed women in self-employment (KGS million)	598.2	656.8	694.3	776.2	841.9	907.4	953.4	997.5	

Scenario 1.2 (continued): Provide maternity benefit over 3.5 months to all women giving birth who are in employment: : self-employed – at the subsistence minimum; paid employed – 66.67 per cent of average wage per month and to those unemployed or outside the labour force – 1,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Amount of benefits and expenditure									
(3) Total cost of providing benefits to women in unemployment and self-employment (KGS million)	289.6	292.7	295.6	319.2	338.5	355.4	372.0	388.0	
Total cost of providing benefits to all women in employment (KGS million) = (1) + (2) + (3)	2,010.0	2,189.6	2,360.2	2,658.2	2,916.2	3,170.2	3,339.9	3,499.2	
Admin cost (KGS million) – 15%	301.5	328.4	354.0	398.7	437.4	475.5	501.0	524.9	
Cost of the scenario									
Cost of the scenario (KGS million)	2,311.5	2,518.1	2,714.2	3,056.9	3,353.7	3,645.8	3,840.9	4,024.1	
Cost as % of GDP	0.65%	0.63%	0.61%	0.62%	0.60%	0.59%	0.56%	0.54%	
Cost as % of Govt. expenditure	1.71%	1.77%	1.56%	1.62%	1.61%	1.66%	1.64%	1.56%	

Scenario 2: Only employed (all) women are covered (unemployed and women outside the labour force are excluded)

Scenario 2: Provide maternity benefit over 3.5 months for all employed women giving birth (formal + informal, including self-employed) at the level a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	

Scenario 2 (continued): Provide maternity benefit over 3.5 months for all employed women giving birth (formal + informal, including self-employed) at the level a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Target group (000s) - employed									
Employed women 15–49 (000s)	741.3	750.1	758.7	762.6	768.2	774.8	780.8	785.7	
<20 years	46.7	45.7	44.3	42.2	40.8	39.8	39.3	39.5	
20–24 years	120.2	118.3	117.0	111.7	108.8	106.3	103.5	100.4	
25–29 years	135.3	142.0	146.7	154.4	152.8	149.0	144.5	140.0	
30–34 years	111.1	114.5	120.2	126.5	135.9	145.8	153.8	158.1	
35–49 years	328.0	331.3	334.4	334.6	339.0	345.4	353.3	362.8	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s) in employment	73.8	75.2	76.5	77.6	78.0	78.3	78.2	77.7	0.10487
<20 years	1.9	1.9	1.8	1.8	1.7	1.7	1.6	1.6	0.04266
20–24 years	22.9	22.5	22.3	21.3	20.7	20.2	19.7	19.1	0.19973
25–29 years	24.0	25.2	26.1	27.5	27.2	26.5	25.7	24.9	0.17746
30–34 years	14.1	14.5	15.2	16.0	17.2	18.4	19.4	20.0	0.13164
35–49 years	10.9	11.0	11.1	11.1	11.3	11.5	11.7	12.1	0.03361
Amount of benefits and expenditure									
High scenario: benefits per head (KGS) – at the level of subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
Low scenario: benefits per head (KGS) – 1000 KGS for 3.5 months	3,500.0	3,500.0	3,500.0	3,772.3	4,010.8	4,230.3	4,461.7	4,705.9	
Scenario suggested by the WG: benefits per head (KGS) – 3000 KGS for 3.5 months	10,500.0	10,500.0	10,500.0	11,317.0	12,032.4	12,690.8	13,385.2	14,117.6	
High scenario: total cost of providing benefits (KGS million)	1,328.3	1,463.7	1,553.4	1,747.7	1,903.5	2,059.1	2,169.2	2,273.0	
Low scenario: total cost of providing benefits (KGS million)	258.4	263.1	267.8	292.7	313.0	331.3	349.0	365.7	

Part 2. Scenarios for the implementation of the national priority: maternity protection benefit

Scenario 2 (continued): Provide maternity benefit over 3.5 months for all employed women giving birth (formal + informal, including self-employed) at the level a) high scenario – subsistence minimum for adults per month b) low scenario – 1,000 KGS per month c) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Amount of benefits and expenditure									
Scenario suggested by the WG: total cost of providing benefits (KGS million)	775.3	789.3	803.5	878.2	939.0	993.8	1,047.0	1,097.1	
High scenario: admin cost (KGS million) – 15%	199.2	219.6	233.0	262.2	285.5	308.9	325.4	341.0	
Low scenario: admin cost (KGS million) – 15%	38.8	39.5	40.2	43.9	47.0	49.7	52.3	54.9	
Scenario suggested by the WG: admin cost (KGS million) – 15%	116.3	118.4	120.5	131.7	140.9	149.1	157.0	164.6	
Cost of the scenario									
High scenario: total cost (KGS million)	1,527.6	1,683.3	1,786.4	2,009.8	2,189.0	2,367.9	2,494.6	2,614.0	
Low scenario: total cost (KGS million)	297.2	302.6	308.0	336.6	360.0	381.0	401.3	420.5	
Scenario suggested by the WG: total cost (KGS million)	891.6	907.7	924.0	1,009.9	1,079.9	1,142.9	1,204.0	1,261.6	
High scenario: cost as % of GDP	0.43%	0.42%	0.40%	0.40%	0.39%	0.38%	0.36%	0.35%	
Low scenario: cost as % of GDP	0.08%	0.08%	0.07%	0.07%	0.06%	0.06%	0.06%	0.06%	
Scenario suggested by the WG: cost as % of GDP	0.25%	0.23%	0.21%	0.20%	0.19%	0.18%	0.18%	0.17%	
High scenario: cost as % of Govt. expenditure	1.13%	1.18%	1.03%	1.06%	1.05%	1.08%	1.07%	1.01%	
Low scenario: cost as % of Govt. expenditure	0.22%	0.21%	0.18%	0.18%	0.17%	0.17%	0.17%	0.16%	
Scenario suggested by the WG: cost as % of Govt. expenditure	0.66%	0.64%	0.53%	0.53%	0.52%	0.52%	0.51%	0.49%	

Sub-scenario 2.1: All employed are covered (same target group) but different level of benefits is provided to employed in formal and informal sector

Scenario 2.1: Provide maternity benefit over 3.5 months for all employed women giving birth: formal sector – at the subsistence minimum for adults per month; informal sector – 1,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									
Total women 15–49 (000s)	741.3	750.1	758.7	762.6	768.2	774.8	780.8	785.7	
<20 years	46.7	45.7	44.3	42.2	40.8	39.8	39.3	39.5	
20–24 years	120.2	118.3	117.0	111.7	108.8	106.3	103.5	100.4	
25–29 years	135.3	142.0	146.7	154.4	152.8	149.0	144.5	140.0	
30–34 years	111.1	114.5	120.2	126.5	135.9	145.8	153.8	158.1	
35–49 years	328.0	331.3	334.4	334.6	339.0	345.4	353.3	362.8	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s) – in informal sector (main job only)	49.7	50.5	51.3	51.9	52.1	52.2	52.1	51.7	0.10487
<20 years	1.8	1.8	1.7	1.7	1.6	1.6	1.5	1.6	0.04266
20–24 years	16.4	16.1	15.9	15.2	14.8	14.5	14.1	13.7	0.19973
25–29 years	15.6	16.4	16.9	17.8	17.6	17.2	16.7	16.2	0.17746
30–34 years	8.7	9.0	9.4	9.9	10.6	11.4	12.0	12.4	0.13164
35–49 years	7.2	7.3	7.3	7.3	7.4	7.6	7.7	8.0	0.03361
Women giving birth (000s) – in formal sector (main job only)	24.1	24.7	25.2	25.7	25.9	26.1	26.1	26.0	0.10487
<20 years	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.04266
20–24 years	6.5	6.4	6.4	6.1	5.9	5.8	5.6	5.5	0.19973
25–29 years	8.4	8.9	9.2	9.6	9.5	9.3	9.0	8.7	0.17746

Part 2. Scenarios for the implementation of the national priority: maternity protection benefit

Scenario 2.1 (continued): Provide maternity benefit over 3.5 months for all employed women giving birth: formal sector – at the subsistence minimum for adults per month; informal sector – 1,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
30–34 years	5.4	5.5	5.8	6.1	6.6	7.0	7.4	7.6	
35–49 years	3.7	3.7	3.8	3.8	3.8	3.9	4.0	4.1	0.03361
Amount of benefits and expenditure									
Benefits per head (KGS) to all employed women in formal sector – at the level of subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
Benefits per head (KGS) to all employed women in informal sector - 1000 KGS for 3.5 months	3,500.0	3,500.0	3,500.0	3,772.3	4,010.8	4,230.3	4,461.7	4,705.9	
(1) Total cost of providing benefits to employed women in formal sector (KGS million)	434.4	480.3	511.4	578.6	632.5	686.4	725.0	760.9	
(2) Total cost of providing benefits to employed women in informal sector (KGS million)	173.9	176.8	179.7	195.8	209.0	220.8	232.4	243.3	
Total cost of providing benefits to all women in employment (KGS million) = (1) + (2)	608.3	657.0	691.1	774.4	841.5	907.3	957.4	1,004.2	
Admin cost (KGS million) – 15%	91.3	98.6	103.7	116.2	126.2	136.1	143.6	150.6	
Cost of the scenario									
Cost of the scenario (KGS million)	699.6	755.6	794.7	890.5	967.7	1,043.4	1,101.0	1,154.8	
Cost as % of GDP	0.20%	0.19%	0.18%	0.18%	0.17%	0.17%	0.16%	0.15%	
Cost as % of Govt. expenditure	0.52%	0.53%	0.46%	0.47%	0.47%	0.48%	0.47%	0.45%	

Sub-scenario 2.2: All employed are covered but different level of benefits is provided to persons in paid employment and self-employed

Scenario 2.2: : Provide maternity benefit over 3.5 months for all employed women giving birth: (1) paid employed – 66.67 per cent of average wage per month and (2) self-employed – at the subsistence minimum per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									
Total women 15–49 (000s)	741.3	750.1	758.7	762.6	768.2	774.8	780.8	785.7	
<20 years	46.7	45.7	44.3	42.2	40.8	39.8	39.3	39.5	
20–24 years	120.2	118.3	117.0	111.7	108.8	106.3	103.5	100.4	
25–29 years	135.3	142.0	146.7	154.4	152.8	149.0	144.5	140.0	
30–34 years	111.1	114.5	120.2	126.5	135.9	145.8	153.8	158.1	
35–49 years	328.0	331.3	334.4	334.6	339.0	345.4	353.3	362.8	
Coverage – Beneficiaries (000s)									Giving birth/ tot fem
Women giving birth (000s) – paid employment	42.4	43.3	44.2	44.9	45.4	45.7	45.7	45.5	0.10603
<20 years	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.04266
20–24 years	12.3	12.1	11.9	11.4	11.1	10.8	10.6	10.2	0.19973
25–29 years	14.2	14.9	15.4	16.2	16.0	15.6	15.2	14.7	0.17746
30–34 years	9.6	9.9	10.3	10.9	11.7	12.6	13.2	13.6	0.13164
35–49 years	5.9	6.0	6.1	6.1	6.1	6.3	6.4	6.6	0.03361
Women giving birth (000s) – self-employment	33.3	33.7	34.2	34.5	34.5	34.5	34.4	34.1	0.10487
<20 years	1.6	1.5	1.5	1.4	1.4	1.3	1.3	1.3	0.04266
20–24 years	11.8	11.6	11.4	10.9	10.6	10.4	10.1	9.8	0.19973
25–29 years	9.8	10.3	10.6	11.2	11.1	10.8	10.5	10.1	0.17746
30–34 years	5.1	5.2	5.5	5.8	6.2	6.6	7.0	7.2	0.13164
35–49 years	5.1	5.1	5.2	5.2	5.2	5.3	5.5	5.6	0.03361

Part 2. Scenarios for the implementation of the national priority: maternity protection benefit

Scenario 2.2 (continued): Provide maternity benefit over 3.5 months for all employed women giving birth: (1) paid employed – 66.67 per cent of average wage per month and (2) self-employed –at the subsistence minimum per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Amount of benefits and expenditure									
Benefits per head (KGS) to all women in paid employment at the level of 66.67% of avg wage (C183) for 3.5 months	26,463.7	28,666.4	31,034.9	34,768.4	38,268.6	41,768.8	44,054.3	46,465.0	
Benefits per head (KGS) to all self-employed women at the subsistence level for 3.5 months	17,989.0	19,471.1	20,299.4	22,521.8	24,391.2	26,293.8	27,732.5	29,250.1	
(1) Total cost of providing benefits to employed women in paid employment (KGS million)	1,122.2	1,240.2	1,370.3	1,562.8	1,735.9	1,907.4	2,014.5	2,113.7	
(2) Total cost of providing benefits to employed women in self-employment (KGS million)	598.2	656.8	694.3	776.2	841.9	907.4	953.4	997.5	
Total cost of providing benefits to all women in employment (KGS million) = (1) + (2)	1,720.4	1,897.0	2,064.6	2,339.0	2,577.8	2,814.8	2,967.9	3,111.2	
Admin cost (KGS million) – 15%	258.1	284.5	309.7	350.8	386.7	422.2	445.2	466.7	
Cost of the scenario									
Cost of the scenario (KGS million)	1,978.5	2,181.5	2,374.3	2,689.8	2,964.4	3,237.0	3,413.0	3,577.9	
Cost as % of GDP	0.56%	0.55%	0.53%	0.54%	0.53%	0.52%	0.50%	0.48%	
Cost as % of Govt. expenditure	1.46%	1.53%	1.37%	1.42%	1.43%	1.48%	1.46%	1.39%	

Scenario 3: Only paid employment is covered – C183

Scenario 3: Increase maternity benefit up to a) 66.67% of average wage per month over 3.5 months for women in paid employment (formal + informally attached to legal enterprises, excluding self-employed) b) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Population (000s)									
Total (000s) – women 15–49	1529.0	1543.0	1555.7	1556.7	1562.7	1571.0	1579.2	1586.7	
<20 years	272.7	267.2	258.8	246.2	238.5	232.4	229.5	230.8	
20–24 years	292.2	287.6	284.4	271.5	264.6	258.3	251.6	244.1	
25–29 years	260.6	273.5	282.6	297.5	294.3	287.0	278.3	269.7	
30–34 years	202.0	208.2	218.5	230.0	247.1	265.1	279.5	287.4	
35–49 years	501.5	506.5	511.4	511.6	518.4	528.1	540.3	554.7	
Target group (000s) – universal									Paid Emp/ Pop – 2014
Total women 15–49 (000s)	404.3	408.0	415.2	420.8	426.6	432.8	438.0	441.8	0.264437
<20 years	10.3	10.1	9.8	9.3	9.0	8.8	8.7	8.7	0.037823
20–24 years	61.3	60.4	59.7	57.0	55.5	54.2	52.8	51.2	0.209938
25–29 years	80.1	84.0	86.8	91.4	90.4	88.2	85.5	82.9	0.307185
30–34 years	72.6	74.9	78.6	82.7	88.9	95.3	100.5	103.4	0.359590
35–49 years	176.9	178.6	180.4	180.4	182.8	186.3	190.5	195.6	0.352698
Coverage – Beneficiaries (000s)									Giving birth/ paid emp
Women in paid employment giving birth (000s)	42.4	43.3	44.2	44.9	45.4	45.7	45.7	45.5	0.10603
<20 years	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.4	0.04266
20–24 years	12.3	12.1	11.9	11.4	11.1	10.8	10.6	10.2	0.19973
25–29 years	14.2	14.9	15.4	16.2	16.0	15.6	15.2	14.7	0.17746
30–34 years	9.6	9.9	10.3	10.9	11.7	12.6	13.2	13.6	0.13164
35–49 years	5.9	6.0	6.1	6.1	6.1	6.3	6.4	6.6	0.03361
Amount of benefits and expenditure									
Benefits per head (KGS) – at 66.67% of average wage for 3.5 months	26,463.7	28,666.4	31,034.9	34,768.4	38,268.6	41,768.8	44,054.3	46,465.0	
Scenario suggested by the WG: benefits per head (KGS) – 3000 KGS for 3.5 months	10,500.0	10,500.0	10,500.0	11,317.0	12,032.4	12,690.8	13,385.2	14,117.6	

Part 2. Scenarios for the implementation of the national priority: maternity protection benefit

Scenario 3 (continued): Increase maternity benefit up to a) 66.67% of average wage per month over 3.5 months for women in paid employment (formal + informally attached to legal enterprises, excluding self-employed) b) scenario suggested by the WG – 3,000 KGS per month									Ratio used for projections – 2014
	2013	2014	2015	2016	2017	2018	2019	2020	
Amount of benefits and expenditure									
Total cost of providing benefits (KGS million)	1,122.2	1,240.2	1,370.3	1,562.8	1,735.9	1,907.4	2,014.5	2,113.7	
Scenario suggested by the WG: Total cost of providing benefits (KGS million)	445.3	454.3	463.6	508.7	545.8	579.5	612.1	642.2	
Admin cost (KGS million) – 15%	168.3	186.0	205.5	234.4	260.4	286.1	302.2	317.1	
Scenario suggested by the WG: admin cost (KGS million) – 15%	66.8	68.1	69.5	76.3	81.9	86.9	91.8	96.3	
Cost of the scenario									
Cost of Scenario 3 (KGS million)	1,290.5	1,426.2	1,575.8	1,797.3	1,996.3	2,193.5	2,316.6	2,430.7	
Scenario suggested by the WG: cost of scenario	512.0	522.4	533.2	585.0	627.7	666.5	703.9	738.5	
Cost as % of GDP	0.36%	0.36%	0.35%	0.36%	0.36%	0.35%	0.34%	0.32%	
Scenario suggested by the WG: cost as % of GDP	0.14%	0.13%	0.12%	0.12%	0.11%	0.11%	0.10%	0.10%	
Cost as % of Govt. expenditure	0.95%	1.00%	0.91%	0.95%	0.96%	1.00%	0.99%	0.94%	
Scenario suggested by the WG: cost as % of Govt. expenditure	0.14%	0.13%	0.12%	0.12%	0.11%	0.11%	0.10%	0.10%	

Annex II.

Sources and definitions of information used in the calculations

	Definition	Source
Employment by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Unemployment by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Persons outside the labour force by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Employment in informal sector by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Paid employment by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Self-employment by age groups	Resolution concerning statistics of work, employment and labour underutilization adopted by 19 th ICLS, 2013	NSC – household survey (projections – ILO calculations)
Fertility ratio (15-49) by age groups (to calculate number of women giving birth in each category)	UN definition: A basic indicator of the level of fertility, calculated by summing age-specific birth rates over all reproductive ages. It may be interpreted as the expected number of children a women who survives to the end of the reproductive age span will have during her lifetime if she experiences the given age-specific rates	UN World Population Projections (medium scenario)
Population by age groups	WPP report definitions http://www.un.org/en/development/desa/population/publications/pdf/policy/WPP2013/Chapters/f_Definitions%20of%20Population%20Indicators.pdf	UN World Population Projections (medium scenario)
Subsistence level	National definitions described in the report	NSC, 2016-2018 – projections of the Ministry of Economics, Kyrgyz Republic, 2019–2020 – ILO calculations based on inflation rate

	Definition	Source
Average wage	National definitions described in the report	NSC, 2016-2018 – projections of the Ministry of Economics, Rep. of Kyrgyzstan, 2019 – 2020 – ILO calculations based on inflation rate
66.67% of the average wage	As prescribed by the International standards	2/3 of the previous earnings – C183 threshold
GMI	National definitions described in the report	Ministry of Labour and Social Policy, Kyrgyz Rep. (projections – ILO calculations)
Inflation and projections	IMF concepts and definitions https://www.imf.org/en/Data	IMF
GDP and projections	IMF concepts and definitions https://www.imf.org/en/Data	IMF
Government expenditure and projections	IMF concepts and definitions https://www.imf.org/en/Data	IMF

Bibliography

- Azevedo, J. P.; Calvo, P.; Nguyen, M.; Posadas, J. 2015. Kyrgyz Republic: Social sectors at a glance, World Bank Discussion Paper No. 1505. Available at http://www-wds.worldbank.org/external/default/WDSContentServer/WDSP/IB/2015/09/01/090224b0830b0040/1_0/Rendered/PDF/Kyrgyz0Republi00sectors0at0a0glance.pdf [28 July 2016].
- Bierbaum, M.; Gassmann, F. 2012. Chronic and transitory poverty in the Kyrgyz Republic: What can synthetic panels tell us? UNU-Merit Working Paper Series, No. 2012-064 (Maastricht 2012). Available at: <http://pub.maastrichtuniversity.nl/bca4d07b-e68b-4b7d-8f9a-af074f5b8b59> [28 July 2016].
- Gassmann, F. 2013. Kyrgyz Republic: Minimum Living Standards and Alternative Targeting Methods for Social Transfers. World Bank Policy Note. Available at: <https://openknowledge.worldbank.org/bitstream/handle/10986/16087/781680PN0P10160h-0Kyrgyz0Rep02012Eng.pdf?sequence=1&isAllowed=y> [28 July 2016].
- Hasanov, R.; Karybaeva, M.; Izmailov, K.; Akkazieva, B.; Isakova, A. 2010. Second Progress Report on the Millennium Development Goals in the Kyrgyz Republic (MDGR), 2010, (Bishkek, 2010). Available at <http://www.google.co.uk/l?sa=t&rct=j&q=&e src=s&source=web&cd=1&cad=rja&uact=8&ved=0ahUKEwiPhZyp8crNAhUFVhQKHVzDCdIQFgggMAA&url=http%3A%2F%2Fwww.p.g%2Fcontent%2Fdam-DG%2Fenglish%2FMDG%2520Country%2520Reports%2FKyrgyzstan%2F2010.pdf%3Fdownload&usg=AFQjCNF35sxNkuomygs7ulzztbg3aps5nw> [28 July 2016].
- G. Jumataeva. 2015. Development of the pension system: Recent practices and development prospects” [28 July 2016].
- ILO. 2012. Social Protection Floors Recommendation, 2012 (No.202). Available at: http://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_INSTRUMENT_ID:3065524 [28 July 2016].
- ILO. 2016. Assessment matrix on social protection in the Kyrgyz Republic. Available at: <http://www.social-protection.org/gimi/gess/ShowProject.action?id=2790> [19 December 2016].
- ILO. 2014. World Social protection report 2014/15. Available at: http://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/publication/wcms_245201.pdf [05 September 2016]

- ILO. 2013. Social protection assessment-based national dialogue: A global guide. Approaches and tools developed from 2011 to 2013. Available at: http://secsoc.ilo.org/abnd/doc/Guide_HiRes.pdf [05 September 2016]
- ILO. 2016. Social protection assessment-based national dialogue: A global guide. Joint United Nations response to implement social protection floors and achieve the Sustainable Development Goals. Available at: <http://www.social-protection.org/gimi/gess/RessourcePDF.action?ressource.ressourceId=53462> [05 September 2016]
- ILO. 2015. Social security for all: Building social protection floors and comprehensive social security systems. Available at: <http://www.social-protection.org/gimi/gess/RessourcePDF.action?ressource.ressourceId=34188> [28 July 2016].
- ILO. 2002. Standards for the 21st Century, Social Security, authors Martine Humblet and Rosinda Silva. Available at: http://www.ilo.org/wcmsp5/groups/public/@ed_norm/@normes/documents/publication/wcms_088019.pdf [28 July 2016].
- IMF. 2014. The Kyrgyz Republic Poverty Reduction Strategy Paper, IMF Country Report No. 14/247 (Washington 2014). Available at: <http://www.imf.org/external/pubs/ft/scr/2014/cr14247.pdf>. [28 July 2016].
- ISSA. 2014. The Social Security Country Profile, the Kyrgyz Republic Available at: <https://www.issa.int/en/country-details?countryId=KG®ionId=EUR&filtered=false>
- EEC. 2016. Eurasian Economic Commission. Article “The EEC Board approved the draft international Treaty on pension provision for employees of the EAEU Member States”. Available (in English) at: <http://www.eurasiancommission.org/en/nae/news/Pages/20-01-2016-1.aspx> [15 August 2016].
- Kyrgyz Republic. 2015. “Social Protection Development Programme 2015-2017. Available (in Kyrgyz) at: <http://www.stat.kg/media/publicationarchive/34387970-880d-4b8c-940d-798aa46b95c7.pdf> [28 July 2016].
- Kyrgyz Republic. 2010. Constitution of the Kyrgyz Republic. Available at (in Russian) http://www.gov.kg/?page_id=263&lang=ru [28 July 2016].
- Kyrgyz Republic. 2009. Law on Guaranteed Minimum Social Standards of May 26, 2009, No.170. Available at: http://www.ilo.org/dyn/natlex/natlex4.detail?p_lang=es&p_isn=84036&p_country=KGZ&p_count=294 [28 July 2016].
- Kyrgyz Republic. 1999. Law on Medical Insurance of the citizens of 18 October 1999, No. 112. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/275?cl=ru-ru> [15 July 2016].
- Kyrgyz Republic. 2005, Law on Health protection of the citizens of 9 January 2005, No. 6 Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/1602> [15 July 2016].

- Kyrgyz Republic. 2003. Law on Single Payer System in Healthcare Financing of the Kyrgyz Republic of 30 July 2003, No. 159. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/1285> [15 July 2016].
- Kyrgyz Republic. 2014. The Government Decree on adoption of State Guarantee Programme with regard to healthcare provision to the citizens of 21 April 2014, No. 229. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/96393> [15 July 2016].
- Kyrgyz Republic. 2009. The Government Decree Regulations on Compulsory health insurance Fund under the Ministry of healthcare of 4 December 2009, No. 728. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/90382> [15 July 2016].
- Kyrgyz Republic. 2009. Law on State benefits of 29 December 2009, No. 318, Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/202692?cl=ru-ru> [15 July 2016].
- Kyrgyz Republic. 2009. The statute on Procedure for Calculation of Family Total Income for Monthly Benefit to Low Income Families with Children of 29 December 2009, No. 824. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/90236> [15 July 2016].
- Kyrgyz Republic. 2009. The statute on the Procedure for Calculation of Standard Income from Allotments and Farmlands of 4 April 2011, No.133. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/92552> [15 July 2016].
- Kyrgyz Republic. 2009. The statute on Guaranteed Minimum Income of 29 December 2009, No. 825. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/90837> [15 July 2016].
- Kyrgyz Republic. 2009. The statute on Procedure of Granting the State Benefits of 29 December 2009, No. 822. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/90232> [15 July 2016].
- Kyrgyz Republic. 2003. Law on Education of 30 April 2003, No. 92. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/1216> [15 July 2016].
- Kyrgyz Republic. The Statute on Social Standards with regard to provision of Social Services to Families and Children, as well as to institutions, providing Social Services to Children with deprived background of 9 October 2012, No. 691. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/93115> [15 July 2016].
- Kyrgyz Republic. 2008. Statute on Cash nutrition standards in social institutions of 15 January 2008, No. 7. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/58839> [15 July 2016].
- Kyrgyz Republic. 1997. Law on State Social Pension Insurance of 21 July 1997, No. 57. Available in Russian at: <http://cbd.minjust.gov.kg/act/view/ru-ru/557> [15 July 2016].

- National Institute of Strategic Research of the Kyrgyz Republic. 2014. Informal employment in Kyrgyzstan. Available in Russian at: <http://www.nisi.kg/ru/arkhiv-nisi/otchjoty/otchjoty-za-2014-god.html>
- National Statistical Committee. 2010. Women and men of the Kyrgyz Republic 2005–2009. Compendium on gender-disaggregated statistics, (Bishkek 2010). Available at: http://www.google.co.uk/l?sa=t&rct=j&q=&esrc=s&source=web&cd=1&cad=rja&uact=8&ved=0ahUKEwjyzNC57srNAhXMHvQKHytID8IQFggeMAA&url=http%3A%2F%2Fwww.un.org.kg%2Findex2.php%3Foption%3Dcom_resource%26task%3Dshow_file%26id%3D17547&usg=AFQjCNEhwUjppOnXQVxNqQtDpngUSDT4w [28 July 2016].
- National Statistical Committee of the Kyrgyz Republic. 2013. Women and men of the Kyrgyz Republic. 2008–2012. Collection of Gender-disaggregated Statistical Data, (Bishkek 2013). Available at: http://www.unfpa.kg/wp-content/uploads/2014/08/Myjchin_Jenchini_ENG.pdf [28 July 2016].
- United Nations Country Team and Ministry of Labour and Social Development of the Kyrgyz Republic. 2016. Recommendations adopted at the Second Assessment-Based National Dialogue on Social Protection Floors in the Kyrgyz Republic. Available in Russian and English at: <http://www.social-protection.org/gimi/gess/ShowProject.action?id=2790> [28 July 2016].
- United Nations. 2013. Third Report on Progress Towards Achieving the Millennium Development Goals in Kyrgyzstan. Available at: <http://www.kg.undp.org/content/kyrgyzstan/en/home/library/mdg/third-mdg-progress-report-kyrgyzstan.html> [28 July 2016].
- World Bank. 2014. Kyrgyz Republic Public Expenditure Review Policy Notes. Social Assistance, Report No. 89022, Poverty Reduction and Economic Management Unit Europe and Central Asia Region (Washington 2014). Available at: <http://documents.worldbank.org/curated/en/2014/05/19717095/kyrgyz-republic-public-expenditure-review-policy-notes-social-assistance> [28 July 2016].
- World Bank. 2014. Kyrgyz Republic Public Expenditure Review Policy Notes. Health, Report No. 88979, Poverty Reduction and Economic Management Unit Europe and Central Asia Region (Washington 2014). Available at: <http://documents.worldbank.org/curated/en/2014/05/19712226/kyrgyz-republic-public-expenditure-review-policy-notes-health> [28 July 2016].
- World Bank. 2014. Kyrgyz Republic Public Expenditure Review Policy Notes. Pensions, Report No. 89007, Poverty Reduction and Economic Management Unit Europe and Central Asia Region (Washington 2014). Available at: <http://documents.worldbank.org/curated/en/2014/05/19717536/kyrgyz-republic-public-expenditure-review-policy-notes-pensions> [28 July 2016].