**Ms. Tamila Barkalaia**

**Deputy Minister of Internally Displaced Persons**

 **from the Occupied Territories and Social Affairs**

Madam president, distinguished representatives of UN member states,

it is an honor and privilege for me to share with you the achievements and challenges we face in Georgia to ensure healthcare and social protection and support to those who need it the most.

I would like to reflect upon questions regarding **children’s rights** and children’s protection. The priority of the country is to raise the child in a family environment, where his/her rights and the best interests are protected. With this as a goal The Parliament of Georgia has adopted the "Code on the Right of the Child" in 2019, which sets a high standard in terms of child welfare and protecting the interests of the child to well-being, safety, healthcare, education, development, social, moral and other interests. The Code guides how all state agencies, local government bodies, other administrative bodies work with and for children.

In this regard, a “social rehabilitation and child care programs” are implemented annually, focusing on: prevention of child abandonment, through cash support (35% TSA remittance recipients are children) and non cash support of families in crisis and shelter for mothers; providing protection and shelter for children in need of state care and guardianship, through foster care, small group homes, psychological counselling, legal representation and social work; providing support to children with disabilities through various rehabilitation programs, assistive devices and most recently a personal assistant program. We continue to diversify our services to children and are planning to implement number of important projects in this direction with the support of partner organizations.

Deinstitutionalization and full closure of large care institutions is on top of our priority list. Since 2004 Georgia closed down 48 orphanages and up to 5500 children were either reintegrated back in their biological families or placed in family type services, such as foster care and small group homes. Two childrens institutions are remaining with 47 and 28 children in each respectively. We are now in process of developing necessary alternative services, such as children’s long term palliative and medical care service, building additional specialized small group homes for children with severe disabilities, and the process of deinstitutionalization is carried out in stages.

To answer the question from some member states, I would like to highlight the issues that concerns child labour and children living and working on the streets. For several years now, there has been an active support program for children working or living on the streets, which aims to prevent the abandonment of children or family separation, their psychosocial rehabilitation and integration, as well as the provision of safe housing (shelter).

Forced labour, including, child labour is being monitored by the Labour Inspection since 2016, labour inspectors are authorized to inspect labour conditions (unannounced) with the aim to identify and respond to the violation. In 2020, the Ministry in consultation with the social partners adopted a list of works (jobs, services), which considering the nature and circumstances of the work, can cause harm to the health and safety of the minor. This document serves as guiding principle for the Labour Inspectors.

Significant measures are undertaken to fight stigma and discrimination and promote inclusion and participation of **persons with disabilities** in society.

Social and physical rehabilitation programs, promoting independent living and social inclusion, such as day care centers, supportive devices, habilitation and rehabilitation, are implemented and variety and access to social programs and services are increasing every year.

Major reform planed is introduction of Social Model of disability in the country (unfortunately Georgia is still using medical model at present). We believe that this change with further contribute to mind set change, that will lead to the full inclusion and participation of persons with disabilities in society and economy.

In response to the questions from member states regarding integration of **Internally Displaced Persons**, I would like to highlight that GoG continuing implementation of Durable Housing Programme for internally displaced persons. Under This program, the State has already provided housing to 45% of the IDP population. The GoG is implementing different projects to provide IDPs with livelihood. Along with IDPs, Government implementing a housing programme for Ecomigrants, persons who suffered due to natural disasters. Since 2015, the Ministry implements the Programme on Reintegration of Returned Migrants and from 2017, the Programme on Integration of Persons under International Protection (Refugees and Humanitarian status holders, asylum seekers and stateless persons).

Numerose questions were asked on **Labour rights** protection. Georgia has made a significant progress in adopting legislative changes and implementing policy reforms to promote safety at work and establish an effective enformsement mechanism. On September 29, 2020, the Parliament of Georgia voted for amendments to the Organic Law of Georgia “Georgian Labour Code” and adoption of the new Law of Georgia on “Labour Inspection”. Amendments to the Labour Code outstandingly strengthen the legal framework for the protection of the labour rights and define that the LEPL Labour Inspection ensures state supervision over labour legislation of Georgia. Accordingly a full-fledged Labour Inspection Service is in place from January 1, 2021.

Enactment of the universal healthcare programme in 2013 was a significant step towards safeguarding **the right to health**. UHC covers planned outpatient, emergency outpatient and hospital services, planned surgical services, oncological diseases treatment and childbirth. From 2017, the costs for medicine for chronic diseases to citizens who are under poverty line, reached the retirement age and persons with disabilities are also covered.

In 2017, a comprehensive long-term (2017-2030) Maternal and New born Health Care Strategy has been approved, which defines next 14 years’ state policy of maternal and new born health, family planning, sexual and reproductive health.

Improving mental health is one of the priorities for the health care system. A state mental health program is fully funded by the state. Since 2014 a system of mental health services has been transitioning from a hospital-only system to a system of psychiatric treatment which includes community services, crisis intervention centers, dispensary clinics, social services, and most recently a mobile teams of doctors and psychologists who visit patients at home.

state funding for mental health services has significantly increased from 2018. Under the new financial conditions, balance between the community and hospital services is 40-60%. Development of housings and small family type institutions have begun. Furthermore, the state commenced the process for rehabilitation and improvement of infrastructure of existing mental institutions. As part of the state program to promote mental health, measures are being taken to reduce stigma on mental health, the causes, and consequences of discrimination, as well as to promote inclusion and self-advocacy.

The process of reviewing, updating and harmonizing the Georgia mental health legislation with the EU legislation is underway.