**Protecting human rights during and after the COVID-19**

**Joint questionnaire by Special Procedure mandate holders**

**Submission of Association for Emancipation, Solidarity and Equality of Women- ESE**

**North Macedonia**

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**Common questions**

**Impact on human rights**

* ***Please explain the impact of the pandemic on the enjoyment of human rights and what actions have been taken by the State to respect, protect and fulfil human rights?***

The impact of the pandemic on the enjoyment of the human rights at this stage of the development can be concluded more on the anectodical data rather and initial observations and analysis then on empirical researches and analysis. For example, the anecdotal data that ESE has is based on an initial assessment on how the pandemic impacts the livelihoods of women and the data that is collected by the Legal Aid Center that provided legal information and representation of women that suffered domestic violence.

The initial observation by the experts (<http://rolplatform.b-cdn.net/wp-content/uploads/2020/05/Covid-19%20and%20the%20WB%20-%20MKD.pdf>) for the impact of the pandemic on the enjoyment of human rights in Western Balkans indicates that there is a high possibility of having a negative impact, especially if we take into consideration the capacities of the democratic institution in the Western Balkans or their fragility. It’s worth noting that in North Macedonia during the pandemic crisis the Assembly was not working due to the election process that was already scheduled and it was supposed to happen on 15 April. Practically this left North Macedonia in a period of having only a technical Government operating in an emergency. The lockdown that has derogated the possibility of the individuals visiting their closest and especially in a situation where there are no functional state institutions has created a possibility of violation of any rights, such as the rights of the parent to have visits with their children. The right of the women that suffered domestic violence to be protected was also endangered. Namely, the state institutions didn’t do much in a way to announce who has stopped or had restricted their operation, so women were reluctant to report and seek needed help. Many women that are engaged in the informal economy, such as cleaning, taking care of someone, or selling goods on the market were not able to earn so practically they were left to struggle on their own. On the other hand, the closure of the schools, and the restriction of the older not to expose themselves and have a restriction in the movements outside their homes (the day) has increased the unpaid care work of the women in this period.

Besides, the exposure of women as health workers had increased the risk of the virus. This is also a case for the women that usually go buying groceries etc. On the other hand, there is still restriction if not a complete absence of the possibility to use some of the health services in public health institutions. It’s worth noting that legal protection was also limited. For example, women were allowed to seek protection in a limited number of cases, which seriously restrained them in getting needed legal protection.

There is no data on whether human rights assessment was conducted before the development of the adopted Governmental measures for recovery.

**Statistical information**

* ***Please provide epidemiological data on COVID-19 infections, recovery and mortality rates in your country, region or locality, disaggregated by nationality, race, ethnicity, religion, membership of indigenous peoples, age, gender, sexual orientation and gender identity, income/poverty levels, disability, immigration status or housing situation. Which groups in your country have been disproportionately affected by COVID-19 and how can this be explained?***

As of 09.06.2020[[1]](#footnote-1), a total of 3,363 cases of COVID-19 have been reported (I = 161.9 / 100,000). The total number of died is 164 and the mortality rate is 7.9/100.000. The highest cumulative incidence per 100,000 inhabitants was registered in Shtip with 427.2 cases per 100,000 inhabitants, Kumanovo (401.6 / 100,000), Skopje (236.5 / 100,000), Prilep (230.8 / 100,000) and Veles (218, 8 / 100,000), while an incident with over 100 patients per 100,000 inhabitants was registered in Debar, Struga, Tetovo and Kocani.

In terms of gender distribution, 1,641 males and 1,722 females were registered. Specific morbidity in males is 158.3 /100,000, while in females 166.8 /100,000. [[2]](#footnote-2)

The age of the patients ranges from 0 to 94 years (median - 44.0 years). The largest number of patients is over the age of 60 - 685 (20.4%) with an incidence of 178.7/100,000, and the highest specific incidence of 230.9/100,000 is registered in the age group of 50-59 years (642 patients). The lowest incidence of 76.5 and 72.7 per 100,000 inhabitants is registered in children aged 0-9 and 10-19 years, where 175 and 182 cases were reported.[[3]](#footnote-3)

However, there is no official data on the nationality, ethnicity, sexual orientation and gender identity, income/poverty levels, disability, and immigration status or housing situation. While based on Association ESE data from the Roma communities, Roma is the most affected due to the sub-standard conditions in the settlements, restricted access to water and electricity, problems to keep distance among the family members, low or no family income, etc.

* ***Please provide age disaggregated data on persons infected by COVID 19 and the percentage of them living in care institutions for older persons. Please provide age disaggregated data on deaths caused by COVID-19 and the percentage of them who were in care institutions.***

The age of the patients ranges from 0 to 94 years (median - 44.0 years). The largest number of patients is over the age of 60 - 685 (20.4%) with an incidence of 178.7 /100,000, and the highest specific incidence of 230.9/100,000 is registered in the age group of 50-59 years (642 patients). The lowest incidence of 76.5 and 72.7 per 100,000 inhabitants is registered in children aged 0-9 and 10-19 years, where 175 and 182 cases were reported. [[4]](#footnote-4)

Nine (5.5%) of those reported, died in an outpatient setting, and the remaining 94.5% died during hospitalization. Only one health worker and one pregnant woman died due to the pandemic. [[5]](#footnote-5)

There is no available data on the number of patients living in care institutions for older people. However, in the national media, there was information about one case from Bitola, infected with COVID – 19 died in a care institution for older people.

* ***Please share any information and data on the availability of health services to ensure access to testing, personal protective equipment and treatment. Please specify to what extent supply issues, economic, social or other barriers have limited access to testing, personal protective equipment and health care services, in particular for persons belonging to particular racial or ethnic groups, indigenous peoples, older persons, persons with disabilities, LGBT persons, persons living in poverty or in situation of homelessness, migrant workers, or persons without legal residency status.***

The testing in the country is available in the seven public (3) and private (4) laboratories. The testing is conducted by Public Health Centres (10). In public institutions, the test is free of charge for the patients, while the state cost is 80 euros per test. However, private clinics and laboratories charge a maximum of 49 euros. The average number of days for testing in the public laboratories is 2-3 days, while to receive the resulting form the test is additional 2-3 days, depending on the laboratory that will process the test. The testing in private clinics and laboratories sometimes takes longer than in the public sector. This is due to the criteria for testing, the public test can have only those who are with mild symptoms and have contact with an infected person, while private testing can be done to anyone.

For a period of four months (March - June), more than 2,000,000 pieces of protective equipment worth more than 1 million EUR were provided to the sate. The list of haw the protective equipment is distributed among the state institutions is not publicly available. The media continuously report about the lack of protective equipment among the health workers. The risk that the health workers are facing by delivering services in the public health institutions is very high and accompanied by an increase in the number of infected health personal. It is important to note that, according to the Report on Public Sector Employees for 2018, a total of 19,704 people work in the public health sector of RNM, and according to the annual report of the HIF in RNM there are 3,386 registered general practitioners, family gynecologists and nurses who work in their offices. In the past period, each of them received an average of 44 pieces of protective equipment or less than one piece per day. This distribution has so far contributed to the infection of 235 healthcare workers, 52 of whom have been infected at work.

* ***Please provide us with data indicating the social-economic impact of the economic downturn triggered by COVID-19 such as changes to household income, increase of unemployment, access to food and traditional livelihoods, poverty or homelessness in your country, region or locality, disaggregated by nationality, race, ethnicity, age, gender, sexual orientation and gender identity, disability, religion or immigration status.***

Based on IMF data the economic situation in North Macedonia has deteriorated significantly due to the Covid-19 pandemic. Real GDP is expected to fall by 4 percent as a result of declining domestic and foreign demand. This, along with the negative shocks of confidence and overflow from global financial channels, has created an urgent need for a balance of payments.[[6]](#footnote-6) The total revenues in the first five months were realized in the amount of 37.3%, while the total expenditures were 38% of the planned ones. As of May, the deficit amounted to 18.9 billion MK Denars or 2.8% of GDP.[[7]](#footnote-7) The number of registered unemployed has increased for 14.848 persons or from 190.948 in January on 205.796 in May 2020. [[8]](#footnote-8) Based on ILO and EBRD report for North Macedonia[[9]](#footnote-9) related to COVID-19 impact on employment, in the second quarter, 85.550 full-time jobs were canceled. Based on the same report the pandemic has affected 82% of the enterprises, will 43% of them have faced a reduction in the revenues for 50% and more than 11% closed the business. According to the Study on effects on the private sector (truism and hospitality)[[10]](#footnote-10) in 42 of the 64 surveyed companies, or 67 percent of those surveyed, the number of employees fell between 81 and 100 percent as a result of the crisis. Only 22 companies, or 34 percent, have not yet been affected by the COVID-19 crisis.

* ***Please provide data on incidents of domestic violence, including femicides disaggregated by a) intimate partner femicide b) family related femicide based on the relationship between the perpetrator and the victim/s and c) all other femicides based on the country context****.*

The anecdotal data that we have based on the initial assessment of the impact of the pandemic over the position of women shows that 60% of women said that all forms of domestic violence have increased; 50% said that they were laid off and that there is a decrease of the possibilities of employment in the country; 40% said that they are not able to obtain the needed health protection and 35% said that there is an increase of the women’s unpaid care work.

In addition to the anecdotal data, the media has reported for many domestic violence incidents. Namely, following the data published on 30.04.2020, the Ministry of Interior has reported 79 incidents of domestic violence in a period March 12 – April 12, 2020 ( [https://www.dw.com/mk/какви-приказни-се-кријат-зад-бројките-на-мвр/a-53288014](https://www.dw.com/mk/%D0%BA%D0%B0%D0%BA%D0%B2%D0%B8-%D0%BF%D1%80%D0%B8%D0%BA%D0%B0%D0%B7%D0%BD%D0%B8-%D1%81%D0%B5-%D0%BA%D1%80%D0%B8%D1%98%D0%B0%D1%82-%D0%B7%D0%B0%D0%B4-%D0%B1%D1%80%D0%BE%D1%98%D0%BA%D0%B8%D1%82%D0%B5-%D0%BD%D0%B0-%D0%BC%D0%B2%D1%80/a-53288014) ). Comparing this number with the number of incidents in the same period last year there is a decrease of 28%. Having on mind the lockdown, the preoccupation of the institutions to deal only with the pandemic related cases it’s not surprising that the number of reported cases has decreased. It’s worth noting that the media has reported two cases of femicide. Both cases were intimate partner femicides.

The responsible governmental institutions amidst pandemic were declaring that the Local self-government unit should have a more significant role in combating this type of violence. Practically the lack of capacities to adapt its operation and to respond urgently the national institutions seek more meaningful participation of the local self-government units (<https://mia.mk/opshtinite-imaat-vazhna-uloga-vo-spravuva-eto-so-seme-noto-nasilstvo-vo-uslovi-na-pandemi-a/>).

Since the declaration of the state of emergency, i.e. from March 17, 2020, until today, a total of 51 clients have applied for legal assistance and support in ESE’s Legal Aid Center. Most of the women, a total of 36 are previous users of our services, while the rest were newcomers. During this period, clients often sought legal advice on dealing with the problem of domestic violence, difficulties in fulfilling parental obligations such as non-payment of child support, parental rights to meet with underage children, delaying convicts for domestic violence with punishment. imprisonment for up to 3 years, suspension of judicial and administrative terms, and divorce.

**Protection of various groups at risk and indigenous peoples**

* ***What measures have public authorities taken to protect high-risk populations from COVID-19, including: a) health care and social workers, b) older persons, c) other persons with a possibly reduced immune system such as indigenous peoples, or persons living with HIV, d) detained and incarcerated persons, including persons under state custody; e) persons living in care homes, f) children and adults living in institutions, camps, shelters or collective accommodation, g) persons with disabilities, h) homeless persons; i) persons living in informal settlements or overcrowded homes; j) refugees, IDPs and k) migrant workers.***

There are no specific measures undertaken by the public authorities aimed to prevent the expositor of the vulnerable groups in the country.

* ***What measures have been taken by public authorities to ensure continued provision of services, including food, healthcare, education, psycho-social assistance to persons in vulnerable situation, including a) older persons, b) persons with disabilities, c) LGBT persons, d) persons in situations of homelessness, e) indigenous peoples, f) victims and survivors of domestic, sexual and gender-based violence, g) human trafficking, h) discrimination, i) victims of contemporary forms of slavery, including forced labour, as well as h) child victims of sale and sexual exploitation?***

The public health care institutions reduced the number of services provided to the citizens, for example, all the tertiary level health institutions suspended all surgeries during the state of the emergency in the country. There are testimonials that public health institutions even do not accept patients without previous PCR negative results. Due to the condition for testing in public health, the patients do their tests in private clinics.

The Public Health Insurance Fund (PHIF) allowed the patients to get their prescribed medicines (medicines that are on the positive list of PHIF and co-financed by them) based on electronic prescriptions sent by the chosen general practitioner to the nearest pharmacy. While those patients that need a prescription from specialists, they are receiving the medicines based on the last prescription issued. Additionally, the patients can get the prescribed medicines in advance for a longer period.

With a decree, the government has frozen the prices of the essential products and have broth a decision for distance learning at all educational levels. Additionally, the government opened a national psychosocial assistance telephone line for the citizens. In the third package of economic measures adopted by the government, students, and pupils from low-income families, families with low income, users of social benefits, and youth are recognized as a specific target group. However, most of the government measures are not sensitive and tailored for a specific vulnerable group.

* ***Have particular measures been taken to address the situation of single parent households?***

There is publicly available info that the Ministry of labor and social policy with the support of the SDC, UN Women, and SIDA has delivered food and hygienical packages to 368 singe parents' family’s users of so-called guaranteed minimal social assistance out of which 95% are women.

**Social Protection**

* ***Please provide information on implemented and planned adjustments to the social safety net in response to the crisis, to ensure that individuals who lost all or part of their income as a consequence of the pandemic have access to sufficient nutrition, housing, water and sanitation, health care, energy and other essential goods and services? How has the State ensured fair and equitable access to social safety net measures across lines of race, gender, sexual orientation and gender identity, membership of indigenous peoples, and others?***

From April 2, 2020, with the enactment of the Decree with the legal force for the application of the law on social protection during the state of emergency, households that have been left without income or have been part of the informal economy or were deleted from the records as active job seekers. To receive a minimum guaranteed assistance, the material insecurity is determined based on the total average amount of all income of all household members on all grounds, calculated from the last month, instead of the previous three months. The amount granted depends on the number and structure of the household and ranges from 4,000 MK Denars for a single-member household to 10,000 Denars for a household consisting of 5 adult members. Households that use guaranteed minimum assistance also received a cash allowance of 1,000 Denars to cover part of the costs for household energy consumption until September 2020.

* ***How has the State approached social protection of small entrepreneurs and for people whose livelihoods are based in informal economies, in particular persons working often informally, in agriculture and other traditional livelihoods, child and health care, domestic work, construction, restaurants, street vending, tourism or as sex-workers? What specific efforts have been made to assess and mitigate the relevant health and social-economic risks to these populations?***

For the enterprises, the Government made available 236 EUR gross contributions to the salaries on monthly bases or 50% of social benefits for each employed person on monthly bases. For the people at social risk, the Government has provided 16 EUR as energetic subsidies. Additionally, all persons who lost their job can receive state reimbursement in case of unemployment based on their period of employment and salaries paid for a certain period. However, the informal economy workers based on the established criteria were not in a position to benefit from the measures, while the other vulnerable groups are not recognized as targets in the economic packages of measures.

**Participation and consultation**

* ***What decision-making processes were used to adopt measures to respond to the pandemic? Did they include participation of local and decentralized authorities, including indigenous authorities, scientific experts, and civil society organizations?***

In the past four months, the decision-making processes for adopting measures to respond to the pandemic were exclusively led by the Government. Because of the state of emergency declared by the president, the parliament was dismissed and the whole decision- making power was transferred to the Government. Additionally, RNM has technical Government, which means technical Prime Minister; two ministers (one from the ruling party and one from the opposition) for finance, labor and social policies, interior, and so on, which additionally burden the processes.

CSOs do not participate officially in the process of decision-making. However, CSOs from outside, continually monitors the decision-making processes and their impact on the citizens and provide requests to the government, that in most cases are not taken into consideration. For example, ESE together with 11 other CSOs has submitted 11 requests for improvement of the position of vulnerable groups, improvement of public institutions actions, and improvement of the level of transparency. The Government took note of the request into consideration in the decision-making processes.

* ***If emergency regulations have been imposed, to what extent have they affected official processes ensuring public participation and consultation? Have women and groups particularly affected by the pandemic and the response measures participated in such decision-making processes?***

The Government broth series of decrees regarding the budget and public finance work, allowing public institutions to make individual and internal budget changes, up to 70%, without permission of the Ministry of Finance or the Government. While the Government has the opportunity to make reallocations of budget funds among budget users without over side from other independent institutions. There is no publicly available information on decisions of the public institutions for making internal changes in the budgets and there is no public involvement in the whole process. The ex -post information is provided for the reallocations among the budget users.

* ***What participation and consultation methods have been employed in preparing and implementing re-opening strategies or after emergency regulations have been lifted?***

N/A

**Accountability and justice**

* ***Could you kindly highlight key concerns in complaints received by national human rights institutions, ombudspersons, anti-discrimination bodies in relation to the COVID-19 crises and how they have been addressed?***

The general conclusion is that the state failed to appropriately assess, identify, and address the major concerns of vulnerable groups of citizens during the COVID-19 crisis. The adopted measures for tackling the epidemic have not taken into consideration the specific problems and needs of women that suffered domestic violence. Because of the lack of statistical data and publicly available official information about the reported cases of domestic violence during the lockdown, the information about the key concerns is provided from the beneficiaries of ESE’s Legal Aid Centre and other CSOs engaged in the provision of direct services for women that suffered domestic violence. In this regard, the following problems were detected:

* Lack of legal, psychological, health, and other services for women that suffered domestic violence. Due to the lockdown of state institutions and measures for limited movement of the population, there was a lack of provision of specialized services adapted to the needs of women;
* Suspension of court hearings, including criminal cases of domestic violence and other related legal cases, such as divorce and custody, alimony, division of property, damage compensation. The Ministry of Justice suspended the court hearing with the exemption of prioritized urgent cases, and those related to domestic violence were not set as a priority in this regard;
* Delayed execution of prison sentences for convicted persons, including domestic violence abusers, as a part of measures adopted by the Government during COVID 19 crisis;
* Victims called responsible for non-compliance with the foreseen dynamic of meeting between the child and the other parent, as regulated in the Decision of the Centers for Social Welfare (CSW). In the period of the declared state of emergency, part of the women did not allow the meetings with the other parent for protection of the children’s health. In these cases, CSW found the victims responsible for „abusing” the CSW decision and part of the victims were even threatened by the police that criminal procedure will be initiated against them for “child molestation;
* Lack of separate state funds for the support of women and their children. Women that suffered domestic violence lack finances for accommodation and living costs, which prevents them from leaving the abusive relationship.
* ***Could you provide any account and statistics on the impact of the COVID-19 pandemic on the operation of the justice system, including law enforcement, the provision of legal assistance and the operation of courts? Which activities were temporarily suspended?***

There are no publicly available data about the proceeding in domestic violence cases by the police, public prosecutors, and courts. Due to the Government's decision for suspension of court hearings during the COVID-19 crisis, all cases related to domestic violence were temporarily suspended, with the exclusion of the civil court procedure for protection orders.

* ***Please describe measures taken by the justice system in your country in protecting individuals from human rights violations and abuse during or after the COVID-19 pandemic. What measures have been taken to prevent, investigate or prosecute a) arbitrary arrest and detention, b) gender-based violence, c) sale and sexual exploitation of children, d) contemporary forms of slavery, e) racial discrimination, or f) illegal evictions?***

There were not separate measures introduced or adapted for prevention, investigation, and prosecution of gender-based violence, including domestic violence during the COVID-18 pandemic.

* ***What measures have been taken to ensure access to justice, and provide accountability and redress for victims of hate-speech, racism, racial discrimination, xenophobia, and related intolerance during the pandemic?***

No measures were adopted for providing accountability and redress for these groups of victims.

* ***What has been the impact of this situation on women's access to justice? Are courts open and providing protection and decisions in cases of domestic violence, and are protection orders accessible?***

The suspension of court hearings during the COVID-19 crisis-affected negatively access to justice for women that suffered domestic violence, since all cases related to domestic violence were temporarily suspended, with the exclusion of the civil court procedure for protection orders.

The criminal cases for prosecution of domestic violence perpetrators were delayed, as well as civil court cases related to domestic violence, such as divorce and custody, child alimony, inheritance, property, damage compensation. The civil court procedure for temporary measures of protection was incorporated in the list of priority cases that were not suspended. However, women may face certain barriers due to the closure of the Center for Social Welfare, which is the competent state institution for submission of proposals for temporary measures of protection or protection orders to the court. There are no publicly available data about the number of civil law cases executed within the COVID-19 crisis.

**Questions by the Independent Expert on foreign debt and human rights**

1. ***Did your Government benefit or have been allocating (as a creditor, lender or donor) any forms of debt alleviation including debt standstill, relief, moratorium, restructuring or cancellation. Was human rights a major consideration in making decisions and the use of the financial resources? Were there any specific groups at risks identified and if so, please detail specific measures considered to protect their human rights.***

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1. ***How much additional resources have been deployed to deal with the pandemic and COVID-19 relief if applicable? If any forms of debt alleviation have been allocated/received, were there any adjustments made to social spending and COVID relief programmes, if so, please provide further details.***

To implement the economic measures and to cover the large budget deficit, due to the lack of sufficient revenues in the state budget, the Government of RNM began using easily available funds in the financial market, by concluding loan agreements mainly with international financial institutions. Something that the Government is undertaking within its borders, and is aimed at providing funds, is to encourage citizens to give up their VAT claims, and companies to pay the profit tax early. What is important for the implementation of economic measures is that they are mostly implemented with funds provided on credit that citizens should return to creditors in the future. At the same time, the financial assistance that citizens and companies receive with most of the measures in the future should be returned to the state. In the period from March to May 2020, 8,700 citizens are in solidarity waived VAT, and provide the opportunity to the government to use the released 154,958 euros for economic measures as a response to the COVID-19 pandemic. Additionally, the government has cut and converted funds from the budgets of the public institutions for 106 million euros for daily expenditures of the government and COVID response measure of the government, Ministry of Economy, Ministry of Labour and Social Policies, Agency for Youth and Sport, and separate budget functions related to culture. Several companies paid the profit tax in advance (Halk Bank in the amount of 1.2 million euros, Komercijalna Banka for 1.9 million euros, Јoint Stock Company for Dairy Product Production- Bitola for 244 thousand euros and IGM trade). In the same period, to deal with the crisis and implement economic measures the government has borrowed from the European Bank for Reconstruction and Development (250,000,000 euros), the International Monetary Fund (176,000,000 euros), the World Bank (140,000,000 euros), the European Union (160,000,000 euros), European Council coronavirus relief funds (66.000.000 euros), COVID-19 Solidarity Fund (no data), Granted access to European Solidarity Fund to procure equipment from EU member states, borrow through the special loan instrument to the bond (700,000,000 euros) and 175 million euros through issuing state bonds.

We cannot assess the impact on the specific groups, due to no existence of public information and detailed publically available data on how the budget funds were collected, allocated, and spent.

At the same time, there is no assessment conducted by any of the public institutions.

Moreover, the implementation of the freedom of information act is postponed for the period after the state of emergency in the country (probably June 22, 2020).

Materials available on the following links:

[http://www.esem.org.mk/pdf/Publikacii/2020/Како%20периодот%20на%20пандемијата%20со%20COVID.pdf](http://www.esem.org.mk/pdf/Publikacii/2020/%D0%9A%D0%B0%D0%BA%D0%BE%20%D0%BF%D0%B5%D1%80%D0%B8%D0%BE%D0%B4%D0%BE%D1%82%20%D0%BD%D0%B0%20%D0%BF%D0%B0%D0%BD%D0%B4%D0%B5%D0%BC%D0%B8%D1%98%D0%B0%D1%82%D0%B0%20%D1%81%D0%BE%20COVID.pdf)

<http://www.esem.org.mk/pdf/Publikacii/2020/Planiranjeto%20na%201%20i%202%20paket%20ekonomski%20merki.pdf>

1. ***In addition, have the debt repayment requirements pressed your Government to cut some of the social expenditures, including on health? If so, do you think that this has hampered the current response of the health system to the COVID-19 crisis?***

There is no data available on how the requirements from the lender's impact or will have an impact on the budget. Furthermore, as of April 2020, the government has paid 34.9 million euros as interests and 197.8 million euros as principal. However, there is no information if the payments include the newly signed contracts and how these payments had influenced the access to basic social and economic rights of the citizens.

1. ***Going forward, what measures or policy recommendation are being considered by your Government/institution for economic recovery and debt sustainability and to prevent and mitigate human rights impacts of the COVID-19 economic fallout?***

The Government has adopted three packages of economic measures for supporting the private business and citizens affected by the pandemic (see below), brought changes in the fiscal and monetary policies in the country to adapt them to the new situation, and provided direct support to citizens.

**Economic support packages to stimulate the economy[[11]](#footnote-11)**

**Fiscal policies**

* Reallocation of surpluses on public agencies’ accounts to budget for COVID-19 response.
* Reallocation of EU funding for COVID-19 response.
* All elected and appointed officials receive minimum wage (= USD 260) in April and May 2020. However, the decision was overruled by the Constitutional Court.
* Chairpersons, management and supervisory boards of public institutions do not receive compensation fees during the crisis.
* Employees in the public sector do not receive holiday allowance for 2020.
* A temporary ban on new recruitment in the public sector, except for necessary staff in the health sector and other sectors important to fight the pandemic.
* State-owned enterprises to reduce expenditure by 15 percent in 2020.
* Decrease of legal penalty interest rate by 50 per cent.
* Exemption from monthly income tax advance payments.

**Monetary and macro-financial policies**

* The National Bank of the Republic of North Macedonia decreased the reference rate for calculating the penalty interest rate to 1.75 percent (= a 0.25 percent decrease).
* Reduced mandatory reserves for new or reprogrammed loans to most affected companies.
* Regulatory easing about liquidity assessments (credit risk management).
* Abolished fees for withdrawing and returning cash to the central vault.
* Faster and more straightforward procedures for changing loan agreement terms.
* Extension of time to classify a loan as NPL, from 90 to 150 days, by end-September.

**Support for specific sectors, enterprises, and employment retention**

**Support for specific sectors**

* All custom fees for critical products abolished during COVID-19 pandemic.
* Freezing of prices of basic necessity products, such as food: bread, salt, oil, milk and dairy products, eggs, our, meat, and pasta; medicines; disinfectants at price level these products had on the day the WHO declared a pandemic outbreak (unless imported at higher prices).
* Export of wheat and our is suspended for the duration of the state of emergency.
* Farmers exempted from movement restrictions to participate in the harvest.
* Proposal to transfer USD 1.3 million to the Tourism Fund (to support the tourism sector).
* Tobacco growers received subsidies of USD 32.5 million.
* Financial support to cabbage growers to stabilize the market.

**Support for enterprises and business continuity**

* USD 13.7 million for loans to micro, small and medium enterprises with 0 percent interest rate through the Development Bank.
* Ministry of Finance and Ministry of Information Society and Administration (MISA) are working on Fintech solutions to ease administrative processes for MSMEs.
* Employers who receive financial support will not have to repay this support if they report a loss for 2020.
* For others, the return of the funds is limited to 50 percent of pre-tax pro t increased by taxable expenditure.
* USD 56.5 million for loans with low-interest rates for protection of companies’ liquidity.
* Bankruptcy proceedings forbade during the crisis and six months thereafter.
* Cancellation of advance VAT payments for three months (April–June) for the hardest-hit companies.
* Cancellation of personal income and pro t tax payments for three months for enterprises that report a loss of >40 percent.

**Employment retention measures**

* Financial support for the private sector to keep employees on payroll: a minimum wage of USD 260 per employee for April and May 2020, or subsidizing 50 percent of mandatory social contributions (April, May, and June).

This is conditional on retaining the same number of workers until July (for the minimum wage) and until August (for the social contributions); initially, the requirement was set for September but was afterward amended.

This rule does not apply to workers who received a net monthly salary higher than USD 715 in the past three months.

Companies that experience lost revenues below 30 percent and those in which more than 10 percent of the top paid workers on average earn more than €2,000 are not eligible for support (the latter not applicable for the subsidized social insurance contributions).

**Companies from the hardest hit sectors (transport, tourism and hospitality), which have a clear tax history and no tax debts, can combine these two measures. Other companies must select the measure for which they will apply.**

**Worker protection measures**

* **Law on Enforcement suspended or ceased until the end of June 2020. Enforcement agents obliged to stop taking enforcement actions until then.**

**Unemployment benefits and social protection**

* Unemployment benefits for people who lost their jobs due to COVID-19, amounting to 50 percent of employee’s average salary, and up to 80 percent of the average salary in the country. The eligibility rules and the duration of the benefits are the same as in “normal” times.
* Quick access to social protection for those without work or who are involved in the informal economy for April and May 2020.
* They will receive an average of USD 125 per household.
* Deferral of rent payment for those who live in social housing.
* A minimum wage provided for athletes, sports workers, and freelance artists.
* Cards for purchasing domestic products for 169 USD for unemployed persons and persons receiving social protection.
* Cards for purchasing domestic products in the amount of 55USD for employed persons will low income.
* Cards for purchasing domestic products for 55 USD for students from 16 to 29 years.
* Vouchers for students and pupils in the amount of 110 USD to pay the university fee or accommodation.
* Vouchers for 550 USD for IT training for youth.

**Access to paid leave (paid by employers)**

* Release from work obligations for: one of the parents of children up to the age of 10, people who are chronically ill, pregnant women, and people with disabilities.
1. Information published by the Institute for Public Health: <https://www.iph.mk/covid19-za-9-6-2020/> [↑](#footnote-ref-1)
2. Information published by the Institute for Public Health: <https://www.iph.mk/covid19-za-9-6-2020/> [↑](#footnote-ref-2)
3. Information published by the Institute for Public Health: <https://www.iph.mk/covid19-za-9-6-2020/> [↑](#footnote-ref-3)
4. Information published by the Institute for Public Health: <https://www.iph.mk/covid19-za-9-6-2020/> [↑](#footnote-ref-4)
5. Information published by the Institute for Public Health: <https://www.iph.mk/covid19-za-9-6-2020/> [↑](#footnote-ref-5)
6. [https://www.slobodnaevropa.mk/a/светска-банка-економија-сиромаштија/30661134.html](https://www.slobodnaevropa.mk/a/%D1%81%D0%B2%D0%B5%D1%82%D1%81%D0%BA%D0%B0-%D0%B1%D0%B0%D0%BD%D0%BA%D0%B0-%D0%B5%D0%BA%D0%BE%D0%BD%D0%BE%D0%BC%D0%B8%D1%98%D0%B0-%D1%81%D0%B8%D1%80%D0%BE%D0%BC%D0%B0%D1%88%D1%82%D0%B8%D1%98%D0%B0/30661134.html) [↑](#footnote-ref-6)
7. <https://finance.gov.mk/mk/node/8789> [↑](#footnote-ref-7)
8. [https://av.gov.mk/content/Statisticki%20podatoci/Мај%202020/Nevraboteni\_maj\_2020.pdf](https://av.gov.mk/content/Statisticki%20podatoci/%D0%9C%D0%B0%D1%98%202020/Nevraboteni_maj_2020.pdf) [↑](#footnote-ref-8)
9. <https://www.ebrd.com/news/2020/ebrd-and-ilo-advise-north-macedonia-on-labour-market-after-coronavirus.html> [↑](#footnote-ref-9)
10. <https://biznisregulativa.mk/Upload/Documents/Studija%20Efektite%20vrz%20sektorot%20turizam%20i%20ugostitelstvo%20od%20Covid19%20pandemijata.pdf> [↑](#footnote-ref-10)
11. <https://www.ebrd.com/news/2020/ebrd-and-ilo-advise-north-macedonia-on-labour-market-after-coronavirus.html> [↑](#footnote-ref-11)