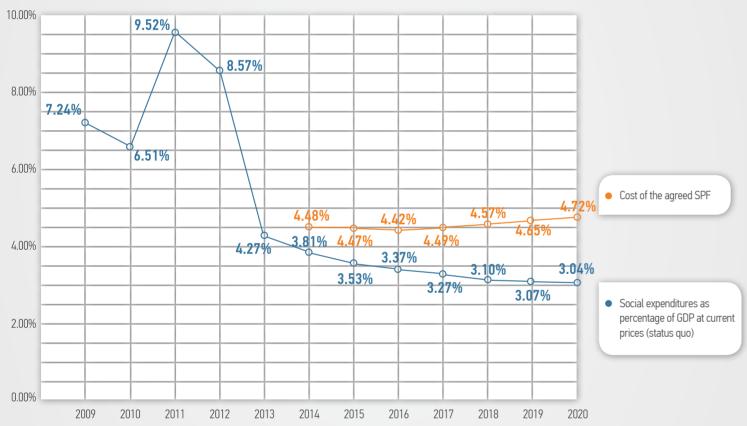
A SOCIAL PROTECTION FLOOR IN MONGOLIA IS AFFORDABLE

How much would it cost to complete a social protection floor in Mongolia?

Projected cost of a social protection floor compared to the projected cost of social expenditures as percentage of GDP (2009-2020)



1.68%

It is the additional cost needed to complete a social protection floor in Mongolia by 2020, spread as follows:







Social health insurance is nearly universal, additional investment would mainly:

- Secure social protection and nutrition for all children
- Achieve universal social insurance coverage
- Improve employability of vulnerable people



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WHAT IS A SOCIAL PROTECTION FLOOR?



Social protection floors comprise basic, nationally defined, social protection guarantees in the areas of health care, income security for children, those of working age and the elderly.

Through basic transfers and essential services, a country with a social protection floor quarantees:



HEALTH

A nationally defined set of goods and services, constituting essential health care, including maternity care, meet the criteria of availability, accessibility, acceptability and quality



CHILDREN

All children enjoy basic income security at least at the level of the nationally defined poverty line, ensuring access to nutrition, education, care and any other necessary goods and services



WORKING AGE POPULATION

All those in active age groups who are unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability, enjoy basic income security at least at the level of the nationally defined poverty line



OLDER PERSONS

All residents in old age enjoy basic income security at least at the level of the nationally defined poverty

SOCIAL PROTECTION ASSESSMENT BASED NATIONAL DIALOGUE

A social protection floor is defined through a participatory approach by actively engaged with line-ministries, other government agencies, the UN agencies, social partners, civil society, academia and development partners. The cost estimation is done for achieving a nationally agreed social protection floor. This method is called as a social protection assessment based national dialogue (ABND).

STEP 1 Mapping & Priorities



DEFINITION OF A SOCIAL PROTECTION FLOOR FOR MONGOLIA

The participants of the national dialogue agreed on the following **definition of a social protection floor for Mongolia:**



Universal health insurance coverage, with a full subsidy of the contribution for vulnerable group and herder

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Quality, available and affordable health care for all throughout the country, with efforts to improve supply and services in rural areas





Universal and free general education, including free boarding schools



Universal CMP, safeguarded by a law and automatically indexed to the cost of living



Improved early-child nutrition through a higher meal allowance indexed to the cost of living for all children attending kindergarten (2–5 years old)



Improved environment to ensure the development and fundamental rights of children of herder families





POPULATION

Universal social insurance coverage for sickness, maternity and working injury, with subsidized contribution for herders, self-employed and informal economy workers (50 per cent subsidized by the State budget)



Replacement rate of maternity benefits at 100 per cent for all workers, including herders, self-employed and informal economy workers.



Reinforced Employment Promotion Programmes and introduction of a specific programme for young herders



Return to work and retraining programmes for victims of working accident and occupational disease, and unemployment insurance.





Three pillar pension system composed of:

- Universal basic pension indexed to the cost of living
- Mandatory social insurance old-age pension coverage, with subsidized contribution for herders, self-employed and informal economy workers (50 per cent subsidized by the State budget)
- Supplementary pension plans.

Create an integrated benefits and services package, including a long term care system for older persons, based on existing social welfare programmes to provide cash or in-kind assistance to poor older persons





