



REPORT ON MILLENNIUM DEVELOPMENT GOALS IN MONTENEGRO 2010–2013



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Author

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Editor

Peter Stonelake

Translation

Jelena Pralas, Azra Kosovac

Graphic design

Marko Mihailovic, M Studio

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SUMMARY

Introduction: In April 2013 the Government of Montenegro adopted the Second Annual Report on the Implementation of the Millennium Development Goals (MDG). Adopting the report, the Government gave the task to the Ministry of Sustainable Development and Tourism to cooperate with the relevant institutions and to prepare (on the basis of the first two annual reports) and submit to the Government the platform for the participation of Montenegro at the high level meeting of the UN General Assembly on the realisation of Millennium Development Goals to be held on 25th September in New York. Tasked with this governmental decision, and in cooperation with the UN System in Montenegro and the appointed representatives of the relevant institutions that are in charge of monitoring individual goals, the Ministry of Sustainable Development and Tourism started preparing the document that will be the basis of the Platform for Montenegrin participation at the meeting.

Background and Novelties in the Reporting Process: An important element of this report, and a novelty in comparison to the previous reports, is the attempt to observe the MDGs in the context of accession to the European Union – the process that is dominant in shaping the country's development policies. This report is different from the previous reports also because it provides deeper analysis of causes of the problems and enablers of success for individual MDGs, with a particular focus on the goals where Montenegro is lagging behind (1, 3 and 7 and partly 2 and 6). On the basis of the analysis of trends on the national and global level, the authors of the report made predictions of the future challenges and post-2015 development priorities. In order to ensure high-quality and objective data, the authors conducted a consultation process that ensured participation of all stakeholders from the public, private and civil sector.

The report provides answers to the following questions: what is the impact of the Millennium Development Goals on the country's development policies, particularly in the context of accession to the EU; what is required to accelerate and maintain the achievement of the MDGs in the long run; how can Montenegro achieve synergy between MDGs and the European Agenda; and what is the Montenegrin contribution to defining the global and national post-2015 development agenda.

Millennium Development Goals and the European agenda: MDGs are adapted to the national circumstances in such a way that they are complementary to many of the goals that are set in the process of accession to the EU and for individual areas. This means that the processes of accession to the EU and implementation of MDGs are mutually supportive. The progress achieved in the implementation of the MDGs will at the same time give a strong contribution to EU integration and implementation of European policies, (including the Europe 2020 strategy as the umbrella development document in Europe), as well as to global sustainable development goals (SDG).

Key findings: Montenegro is well on track to achieve the Millennium Development Goals, except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability). Additional efforts will be required to achieve MDG 2 (coverage of vulnerable groups) and MDG 6 (rate of mortality caused by chronic non-communicable diseases).

MDG 1 (Poverty Reduction) will not be achieved by 2015. Particularly concerning are the increases in poverty and deeper inequalities: poverty rates in rural areas and in the north are almost twice as high as the national average. Almost half of the population of the north of Montenegro is poor, as is most of the rural population. Roma and Egyptians are

the most vulnerable population category. They are followed by refugees and displaced persons, social benefit users, retired people, long-term unemployed people and people with disability. The youth employment rate is very high and there is a large number of young people who are not in the education system but are also neither employed nor looking for work. Children are much more exposed to poverty than adults.

Positive trends have been recorded in the reduction of the overall unemployment rate compared to the middle of last decade and a reduction in the difference between the unemployment rates for men and women. Montenegro started implementing a large number of activities aimed at improving the required knowledge and skills, encouraging development and employment in less developed municipalities and developing female entrepreneurship. Youth employment and inclusion have been set as priorities, which is in line with the latest measures initiated by the EU. There is a significant progress in the policy for data accessibility. Europe 2020 Strategy gave a strong impetus to the efforts invested in solving the issues of poverty and social exclusion in the EU, as well as to creating opportunities for basing new growth on the principles of sustainability. Child poverty and early dropout from school, as well as youth unemployment, make up a constituent part of the European Platform against Poverty and Social Exclusion.

It is realistic to expect that Montenegro will achieve MDG 2 (Universal Education) by 2015. The rate of enrolment in preschool education has increased significantly, as well as the rate of coverage of children by primary-school education. The literacy rate is also near the target. Although the trends are positive, there are inequalities in the coverage of children by preschool and primary-school education in rural areas and in the north of Montenegro, as well as of Roma and Egyptian children and children with disabilities. Disparities are also strong in the rates of attendance and completion of primary school.

MDG 2 is fully incorporated into the relevant strategic documents and it significantly contributed to paying more attention to children with special education needs. Significant progress has been made in the field of inclusive education and the coverage of children is increasing. A goal of the ET 2020 is 95% coverage of children by pre-school education. It will be a serious challenge for Montenegro. On top of that, the EC particularly emphasizes the importance of the quality of education, vocational training and solution of the equality issue.

MDG 3 (Gender Equality) will not be achieved since Montenegro is lagging behind in all key indicators, particularly in the unemployment rate and in the number of women mayors. A specific characteristic of this goal is that the lagging behind cannot be explained by the consequences of the economic crisis, but rather by the lack of the capacities to implement legislation, by social values (prejudice and gender-role prejudice), but also by the lack of political will and will of the citizens.

Positive trends have been recorded in the increase in the employment rate for women in relation to the unemployment rate; and in the almost equal rate of employment of men and women. Numerous training and employment programmes have contributed to this progress, as well as the global trend that in periods of crisis women are more active than men. Participation of women in elected bodies at the national level has significantly increased since the last parliamentary elections, but the current situation is still far from the target values, particularly at the local level. According to the opinion of the European Commission, it is necessary to undertake concrete steps to ensure consistent implementation of non-discrimination and gender equality in practice. These steps should include strengthening of supervision bodies and more efficient response of the law enforcement bodies in case of violations. At the same time awareness should be raised and support measures strengthened, particularly in employment and public representation of women.

MDG 4 (Reduce Child Mortality) was achieved back in 2009, except for the coverage by immunisations that is also close to the target. Relevant goals defined in international and national policies and strategies have been achieved as well. Adequate monitoring and education of the population contribute to the progress towards the achievement of the targets. MDG 4, as well as other health-related goals, is fully incorporated in the national health policy and its programmes and implementation measures.

Since 2010 it has been impossible to monitor a number of indicators for the health-related MDGs. When the Second Annual MDG Report was adopted, the issue of not recording causes of death was particularly emphasised and the Government adopted a conclusion, on the basis of which by the end of 2013 the missing data on the causes of death will be collected and the issue of availability of data in the field of mortality statistics will be permanently solved in 2014.

MDG 5 has already been achieved: Since the middle of last decade all the childbirths in the country have been carried out with the assistance of health personnel and there are almost no deaths related to pregnancy, childbirth or the period after childbirth. Maintaining the achieved results has been supported by the opening of the Guidance Clinic for Female Reproductive Health and its positive effects are already visible. The goals of the WHO/EU health policy Health 2020 include the goal of improving the capacity for health management at the level of the government and at the level of the society. The activities towards the promotion of children health and prevention should be intensified and sufficient funds should be allocated to the implementation of prevention programmes, paying due attention to the multi-sectorial action on the social determinants of health and overcoming inequalities in health.

MDG 6 (Combating HIV/AIDS, Tuberculosis and Other Diseases) will be partly achieved by 2015. The progress in the targets related to HIV/AIDS and tuberculosis is in line with the set goals, but the situation is not satisfactory in the target relating to reduction of the mortality rate caused by chronic non-communicable diseases. According to the latest data, the rate of mortality caused by cardiovascular diseases was 25% higher than the set target, while in the case of malignant tumours it was 40% higher than the target. According to WHO and EU recommendations, the future development directions should be defined in such a way that they include new trends in the health sector. When it comes to the burden of diseases, these trends have been significantly changed and besides chronic non-communicable diseases, mental health and antimicrobial resistance are very high on the list, as well as the financial sustainability of the health system. The social, cultural, environmental and political determinants of health have been increasingly important.

It is not realistic to expect that MDG 7 (Ensuring Environmental Sustainability) will be achieved by 2015. Despite certain weaknesses in the statistics, it can be observed that the values of the indicators for both targets are going in the right direction and a certain level of progress is obvious. Further efforts in the field of the reduction of energy intensity are of great importance not only for environmental sustainability, MDGs and the process of accession to the EU, but also for the competitiveness of the Montenegrin economy. As for the share of energy from renewable sources, Montenegro has already achieved more than the European goal of 20%, and there are high chances that it will achieve the national goal of 33% by 2020.

The key constraints that hinder faster progress are related to insufficient support to plans and programmes of environment protection, limited implementation of legislation and inadequate implementation of the mechanisms for the participation of all stakeholders in the development of country policies. The pressures for achieving fast economic benefits

(that are based on natural resources and the crisis) influence the increase in the number of activities that are not sustainable. Achieving most of the MDG targets is of great importance for accession to the EU since they present the measure of success in implementing a number of European policies and legislation instruments, including climate and energy policy, nature protection directives, drinking water directives and urban wastewater treatment directives, as well as other EU acquis policies.

Montenegro has been successfully implementing MDG 8 (Global Partnership for Development), and it is expected to achieve this goal by 2015. In the last couple of years coordination between donors and representatives of international organizations has improved and the formal mechanism for cooperation and coordination between the Government and the donors has been established. Progress has also been made in the implementation of information and communication technologies. E-education, E-health services, and E-inclusion are being developed with a view to encouraging all the elements of society to use modern technologies. As for the public administration, the programme of e-government is being developed with a view to improving the quality of the services provided by the state bodies.

Global and national challenges: Montenegro is facing numerous challenges at the global and national levels: the extended duration and new impacts of the economic crisis, corruption and growing inequality in the society; child poverty and unemployment of the young; competitiveness of the economy, innovation and changes in technology; climate changes and other challenges that impact the long-term development of the country and the region. The extended duration of the economic crisis slowed down the recovery of the Montenegrin economy and led to constraints in the budget for development issues. The conditions for implementation of the policies are difficult in the areas of poverty reduction, combating corruption, and reforms of the social care, education and health systems and environment protection. Climate change could bring significant losses for the country in terms of economic activities, particularly in the fields of tourism, agriculture and energy.

Montenegro is well prepared for the process of wording the post-2015 global development agenda. National consultations on the post-millennium development priorities identified eight areas. They should serve as the basis for the future Montenegrin development agenda. Although most of the priority topics are not new, the novelty lies in the approach to the solution of the problems. This approach has to be integral, inter-sectorial and multi-dimensional. Development priorities for the post-2015 period include getting closer to achievement of the MDGs that have not been achieved yet and putting new priorities and sustainable development goals into the development agenda at the national, regional (EU) and global levels.

<u>Conclusions and recommendations:</u> To achieve further progress, Montenegro has to devote more attention to inequalities and social exclusion. It has to monitor the implementation of the existing policies and ensure implementation of concrete measures for achieving sustainability. It is particularly important to strengthen statistics and inter-sectorial coordination, as well as to improve capacities for the implementation and system of effective and transparent management and to ensure the quality of services and good solutions to overcome and mitigate consequences of the budget constraints caused by the economic crisis.

And finally, it is important to influence causes that are not of an economic nature. This should be carried out through the activities of raising awareness and improving the knowledge, attitudes and practice in order to stimulate changes in the behaviour of

individuals, the community and society and to ensure sustainable and inclusive growth. The people of Montenegro who were consulted in the process of national consultations on the post-millennium development goals also think that efforts have to be invested in strengthening social capital on the basis of solidarity, family values, tolerance, respect for others and non-discrimination.

1 MILLENNIUM DEVELOPMENT GOALS IN THE MONTENEGRIN CONTEXT

This Report provides an overview of the progress Montenegro has achieved in the implementation of the Millennium Development Goals in the context of accession to the EU, which has become dominant in shaping the country's development policies. On top of that, this Report offers guidelines for the MDG targets that have not yet been achieved and identifies new development issues that have turned into priorities. Thus, it is making a contribution to the wording of the post-2015 development agenda.

Millennium Development Goals were broadly discussed in Montenegro and have been taken into account in the processes of adoption of laws, sectorial policies, plans and programmes. Development and implementation of the relevant country policies and permanent improvement and harmonization of the national legislation with international, particularly European, recommendations have ensured the significant progress that Montenegro has made in the implementation of the MDGs. In some areas, like poverty reduction, the Millennium Development Goals have had a significant impact on the design of the appropriate measures that were focused on the vulnerable population groups.

1.1 Introduction

The Report on Millennium Development Goals in Montenearo 2010–2013 was developed under the oversight of the network of coordinators for regular annual reporting on the Millennium Development Goals (MDG)¹ and the Ministry of Sustainable Development and Tourism (Division for Support to the National Sustainable Development Council) which was also the lead institution of the process. The purpose was to obtain a comprehensive overview of the experience with the MDGs and to give recommendations for the future (by and after 2015). Thus, the process also included other actors; members of the public sector and civil society representatives², the UN system in Montenegro and consultants.

A new and very important element of this Report is the attempt to analyse the MDGs in the context of Montenegrin accession to the European Union, a process that is currently dominant in shaping the country's development policies. The Report also attempts to provide guidance for the MDG targets that have not yet been achieved and to identify new prioritized development issues, as well as to contribute to the preparation of the post-2015 development agenda. The Report will serve as the basis for the participation of the Montenegrin delegation in the UN General Assembly special event regarding the achievement of MDGs on 25 September 2013.

The first steps in developing the MDG Report were to (i) define its scope in line with the UNDG Guidance Note from May 2013³, (ii) mobilize the team and (iii) decide on the methodology. These first steps were followed by collecting necessary information, opinions and assessments through cooperation with state institutions, UN agencies including UNDP, UNICEF, WHO and UNHCR and other interested parties. The report was then drafted after analysing the collected material.

When developing the Report, particular attention was dedicated to the MDGs and targets not likely to be achieved by 2015⁴. Efforts have been made to collect the most recent data for all MDGs: for most of the indicators the available data are for 2011,

while for others 2012 values are included, and for 2013 where possible. Appendix 1 presents an overview of all data (broken down by years, goals, targets and indicators). The MDG Report relies on official statistics (MONSTAT) and information obtained from relevant state bodies and institutions for indicator data. For additional analysis the Report uses information and data from European policies and documents about Montenegro, relevant information from UN reports and analyses, as well as relevant information from other sources.

The first Draft MDG Report was made available to experts and relevant national institutions through a number of consultative mechanisms in July 2013. The contents and the quality of the Report were thus checked with national stakeholders and with the UN system including the UNDG, which supports the development of MDG reports on the regional and global level (which was a novelty in comparison to the preparation of earlier reports). The Report was finalized in early September 2013 through integrating the suggestions and comments from the consultative process and from appropriate government bodies.

1.2 KEY NATIONAL MDG MILESTONES

Integration of MDGs into the country policies of Montenegro started with drafting the Development and Poverty Reduction Strategy in 2003. This Strategy marked the beginning of systematically monitoring poverty and of implementing measures aimed at reducing inequality and poverty levels. Subsequently, regular poverty surveys have been conducted since 2006. Other MDGs have been discussed and partly integrated into country policies, while progress is periodically monitored and assessed.

Adaptation. A question that was raised in these processes was— to what extent were some of the globally set goals and indicators appropriate for the Montenegrin circum-

stances? Therefore, the development of the Interim Report on Millennium Development Goals in Montenegro (2010) marked the beginning of their "localization" i.e. adaptation to the national context. The process particularly focused on the relevance of individual indicators and targets for the country development priorities and on the availability and comparability of data and time series for monitoring progress. The result was a set of new, "nationalized" goals, indicators and targets (their relation to the global goals, indicators and targets is presented in Appendix 2). Since 2010 their progress has been monitored on an annual basis.

In adapting the global goals, the emphasis was put on issues that provided a realistic reflection of the previously achieved development level in the country as well as of future priorities and aspirations. The national MDG issues included: relative poverty and the multi-dimensional nature of poverty, pre-school education coverage, representation of women in elected government bodies, reduction of mortality caused by non-communicable diseases, the degree of waste water treatment, etc. On the other side, the following issues were not included: eradication of famine and malnutrition as forms of extreme poverty, access to safe drinking water sources and basic sanitary conditions, as well as some health challenges/diseases untypical for Montenearo.

Adoption. The adapted MDGs have been included in development debates and are taken into account in the processes of adoption of legislation, sectoral policies, plans and programmes. In individual areas (like poverty) they had a significant impact on the formulation of appropriate strategies and plans and on drawing attention to particularly vulner**able population groups.** Reduction of health inequality, for example, is one of the health policy priorities and is closely related to MDGs 4, 5 and 6. This contributed to the definition of special measures and programmes for vulnerable groups. The MDGs also encouraged adoption of the policy of inclusion of all children in pre-school education. However, generally speaking, the MDGs were rarely in focus when developing country policies or when improving the legal framework – they contributed, but did not decisively shape the national development agenda.

The MDGs have been well fitted into the national policies and strongly support and/or are complementary to the sustainable development goals that are defined in the National Sustainable Development Strategy from 2007 (revision in progress). They are also integrated into some of the strategic umbrella documents such as the recently adopted National Development Plan (Montenegro Development Directions 2013 – 2016).

Adoption of the MDGs contributed to the improvement of coordination mechanisms and the development of partnerships in various policy fields. Formal mechanisms for inter-sectoral coordination have been established – the Council for the Rights of the Child, Social Council, national coordination mechanism for the Global Fund for Combatina AIDS, TB and malaria, etc. The role of these mechanisms is to ensure coherence in the work of several ministries and public institutions. As a rule, they also include civil society and the business sector as needed. Since the adoption of the MDGs, participation, cooperation and consultations with civil society have improved, as well as coordination among donors and representatives of international organizations. A formal mechanism for cooperation and coordination between the Government of Montenegro and donors has been established and is managed by the Ministry of Foreign Affairs and European Integration.

1.3 DEVELOPMENT CONTEXT IN MONTENEGRO- LINKS BETWEEN THE MDGS AND EU ACCESSION

Montenegro has a population of about 620,000 and is an upper-middle-level income country⁵. In 2012, the Gross Domestic Product (GDP) amounted to €3.3billion (current prices, Ministry of Finance estimate) or €5,378 per capita. After the recession GDP grew by 2.5% in 2009, 3.2% in 2010 and 2011, but had negative growth of about 0.5% in 2012⁶. Measured by the Human Development Index (HDI), Montenegro is a country of high human development and is in 52nd place in the world with an HDI of 0.791 in 2012⁷.

Achievements. In the broader national context, the most significant achievements of the last few years have been the recovery of the economy, maintaining macroeconomic stability and the continuation of sectoral reforms. There are also visible improvements in the area of political and civil, economic and social rights and in the protection of minorities⁸, as well as in the HDI. A very significant achievement is the opening of the accession negotiations with the EU (29 June 2012).

Montenegro is making good progress towards achieving the Millennium Development Goals (cf. Table 4-1) except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability) and parts of MDG 2 (coverage of vulnerable groups) and MDG 6 (mortality rate caused by chronic non-communicable diseases). MDGs 4 and 5 with targets on child mortality and maternal health have already been successfully achieved while the MDG 2 targets on preschool and primary school coverage and illiteracy as well as the MDG 6 targets on HIV/AIDS and TB

prevalence are all on track to be achieved by 2015. In order to make further progress there is a need to strenathen the focus on inequalities and social exclusion, particularly in the north, in rural areas and amona the Roma population. Poverty trends are worrying and indicate that Montenegro needs to analyse the effectiveness of the existing policies and make urgent improvements in social and employment policies. There is strong formal support for environmental sustainability, but it has not been sufficiently implemented in practice. Montenegro also has to overcome weaknesses reaardina disaaareaated statistics and cross-sectoral coordination. It has to further improve its implementation capacities and the system of effective and transparent governance, work on quality aspects as well as to find ways to overcome and alleviate the consequences of the budget constraints caused by the financial crisis.

Factors encouraging progress. In its Enlargement Strategy 2012–20139, the European Commission encouraged enlargement countries to align their national goals in the field of employment, innovation, climate change, energy, education, poverty reduction and social inclusion with the goals of the Europe 2020 strategy¹⁰. It also underlined that, from 2013, the Commission would pay more attention to employment and social reforms and that it would promote significant participation of the enlargement countries in the programmes related to the flagship initiatives of the Europe 2020 strategy¹¹.

The Europe 2020 strategy is about delivering growth that is <u>smart</u> (through more effective investment in education, research and development), <u>sustainable</u> (with a decisive move towards a low-carbon economy) and <u>inclusive</u> (with a strong emphasis on job creation and poverty reduction). Five headline targets of this strategy are:

- Employment: 75% of 20–64 year-olds to be employed;
- 2. Research and Development: 3% of the EU's GDP to be invested in R&D:
- 3. Climate change and energy sustain-

<u>ability</u>: (a) greenhouse gas emissions 20% (or even 30%, if the conditions are right) lower than in 1990, (b) 20% energy from renewable energy sources and (c) 20% increase in energy efficiency;

- 4. Education: (a) reducing school dropout rates to below 10% and (b) at least 40% of 30–34 year-olds completing university education;
- <u>5. Fighting poverty and social exclusion</u>: at least 20 million fewer people in or at risk of poverty and social exclusion.

The MDGs significantly match the requirements of the accession negotiations. The accession process is an undisputable and key priority for the country and it is the primary driver of political and development reforms. This report finds that the progress towards achieving the MDGs has improved the position of Montenegro in the process of EU integration and negotiations. Thus, for example, the education system reform where MDG 2 (pre-school and primary education) had a prominent place, received a very positive assessment in the EC Screening Report. The Screening Report underlined, however, the need to work further on improving the quality of education.

Besides the accession process, progress towards achieving the MDGs was also supported by the development and implementation of relevant national policies as well as by permanent improvements and harmonization of national legislation with international recommendations and standards. Fulfilment of international obligations stemming from signed and ratified key UN and Council of Europe conventions also had a significant influence. Capacity building of all stakeholders is another enabling factor as well as the improved involvement of civil society and the private sector in the process of policy development and implementation.

Challenges. The European Commission (EC) reports present a detailed picture of the economic and social situation in Montenegro, and the assessments are very much applicable to the identification of key chal-

lenges in the implementation of the MDGs. According to EC reports, key challenges in the accession process are related to chapters 23 (judiciary and fundamental rights) and 24 (justice, freedom and security). Significant challenges are also found in the agricultural and rural development policies, the energy sector, statistics, social policy and employment, as well as in the environment and climate change policies.

Other key challenges include: ensuring necessary administrative capacities at the national and local levels for adoption and implementation of high quality policies and regulations; further implementation of reforms in education and health; as well as improvements of infrastructure and human resources with a view to increasing employment (better matching of knowledge and skills with labour market needs). Further challenges include protection of children's rights, ensuring gender equality and prevention of social exclusion of vulnerable population groups. Limited public finances are a significant challenge for further reforms in the field of social policy. The last Progress Report also finds that progress in the field of the environment is hindered by (among other things) the fact that these issues are not considered to be a priority at a political level and therefore the allocated funds are insufficient.

A very important challenge is combating corruption which is still widespread in the society. Corruption jeopardizes the prospects for exercising fundamental rights and equal opportunities, it hinders access to health and education and it is also a limiting factor for sustainable use of natural resources and the predominance of public over private interests.

Limited progress in several areas (poverty and employment, gender equality, environment) was identified in earlier MDG reports. Montenegro's commitment to achieve the MDGs and progress therein is therefore an important complementary process to addressing the important challenges highlighted by the EC for the country and in contributing to several targets

under Europe 2020. And similarly, reforms undertaken for accession purposes are likely to impact positively on the achievement of several Millenium Development Goals, specifically those MDGs which are lagging behind and for which targets are unlikely to be met by 2015, namely poverty reduction, gender equality and the environment. The processes of EU integration and MDGs implementation complement and support each other.

2 STATUS AND TRENDS, SUCCESS, CHALLENGES AND CONSTRAINTS

Since 2010, when the MDGs were adapted to the national context, Montenegro has achieved significant success in the implementation of the Millennium Development Goals. Most of the goals, except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability) and some parts of MDG 2 (coverage of vulnerable groups) and MDG 6 (rate of mortality caused by chronic non-communicable diseases) are expected to be achieved. MDGs 4 and 5 with targets related to the reduction of child mortality and improvement of maternal health have already been achieved and trends show that the targets related to enrolment in pre-school and primary school education institutions and the target related to the reduction of illiteracy within MDG 2, as well as targets for the prevalence of HIV/AIDS and tuberculosis within MDG 6 will be achieved by 2015. The extended duration of the economic crisis slowed down the recovery of the economy and led to the budget constraints that hinder the solution of development issues. Conditions for the implementation of policies in the field of poverty reduction, combating corruption, reform of the system of social care, education and the health sector, have become more difficult, as have the conditions for the application of the environment protection policy. MDGs are well integrated into national policies. They strongly support and complement sustainable development goals and are integrated into some of the umbrella strategic documents, like the recently adopted national development plan.



Poverty rates in rural areas and in the north are almost twice as high as the national average. About one half of the total population of the northern region, i.e. 70% of the rural population fall into the category of the poor. A particularly worrying trend is youth unemployment and child poverty. Positive trends have been recorded in the reduction of the total unemployment rate in comparison to the last decade and in the reduction of the difference between the unemployment rates of men and women.

2.1 MDG 1:

REDUCE RELATIVE POVERTY AND OTHER POVERTY DIMENSIONS

Nationally adapted targets and indicators for MDG 1 are to:

- 1. reduce the proportion of the population living under the poverty line by 50% in comparison to 2005 (poverty rate of 5.6% in 2015);
- 2. reduce inequality in the distribution of consumption (Gini coefficient of 24%);
- 3. reduce regional discrepancies in development (halve the poverty rate recorded in 2005 in the North of Montenegro and in the rural areas to 8.9% and 8.2% respectively); and
- 4. reduce unemployment to 9% by 2015.

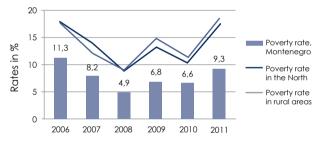
MDG 1 will not be achieved by 2015 since progress on all key indicators is lagging behind. Particularly concerning is the increase in poverty and pronounced inequalities (related to vulnerable groups and geographical areas).

Despite methodological differences making MDG 1 targets hard to compare with the goals of EU 2020¹², it is certain that the progress towards this goal will contribute to the necessary reform of the social care system (in the accession process) and approximation to EU standards.

2.1.1 TRENDS AND INEQUALITY

Poverty. The trend of poverty reduction 13 was obvious from the middle of the last decade to 2008 when the situation was most favourable and when almost all indicators were at the level of the goals set for 2015, and some were even much better than that (Figure 2-1 and Appendix 1). Since then Montenegro has seen a significant increase in the level of indicators, which was particularly strong in 2011 when poverty rates, as well as the poverty gap and severity were twice as high as the values projected for 2015¹⁴. A deterioration is also recorded in relation to inequality measurements. In 2011, 20% of the richest had an average consumption that was 4.1 times higher than the consumption of 20% of the poorest, which is the highest recorded value of this indicator since 2005.

Figure 2-1: Poverty rate in Montenegro (overall, in the north and in rural areas)

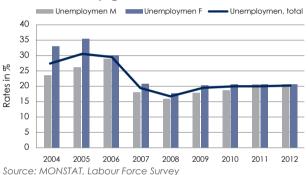


Source of data: MONSTAT, 2006 - 2011

Unemployment. There are both positive and negative trends in the unemployment rate¹⁵ (Figure 2-2). The period 2004–2008 was characterized by a significant decrease (about 10 percentage points) in the rate, i.e. progress towards achieving the goal, but in the last five years the rate saw a slight increase and achieved the level of 19.7% in 2012. The fact that about one-

fifth of the active population in the country were unemployed last year (2012) means that it is not realistic to expect the goal of 9% to be achieved by 2015. The difference between unemployment of women and men has been significantly reduced in the last decade, so in 2012 the unemployment rate for women was just one percentage point higher than that for men. The long-term unemployment rate (unemployment that lasts longer than a year) has been almost constant in the last five years and it ranged from 15.5% to 15.6% while the target value for 2015 is 7%.

Figure 2-2: Unemployment Rate Trends – overall and by gender



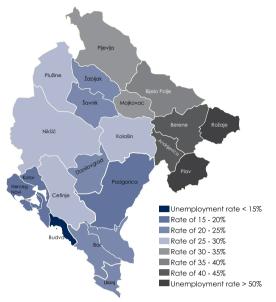
Inequalities. Poverty and unemployment indicators clearly show that there are significant inequalities that depend on the place of residence (different regions, and rural vs. urban areas). As Figure 2-1 and Table 2-1 show, poverty rates in the rural areas in the northern region are almost twice as high as the national average. The category of the poor includes about half of the total population of the northern region, i.e. almost 70% of the rural population. Similarly, the unemployment rate in the north is two-thirds higher than the total rate in the country in 2011.

Table 2-1: Inequalities in the poverty rates by region and for the rural and urban populations

In alia orta va 1071	Regions			Areas	
Indicators (%)	North	Centre	South	Urban	Rural
Poverty rate	17.5	6.3	6.4	4.4	18.4
Proportion of the poor	50.4	34.4	15.2	30.8	69.2
Proportion of the total population	26.8	51.0	22.1	65.0	35.0

Source: Second Annual Report on MDGs, 2012

Figure 2-3: Inequality in the unemployment rate by municipalities in the 2011 Census



Source of the map: Google; Source of data: MONSTAT – 2011 Census

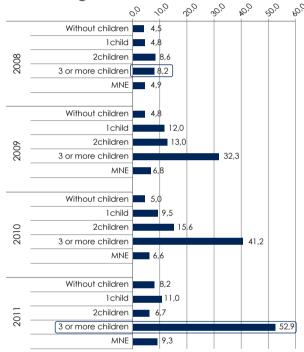
As seen in Figure 2-3¹⁶ the highest unemployment rates (above 30%) were recorded in the seven northern municipalities inhabited by slightly more than a quarter of the total population. Unemployment rates higher than 50% were recorded in the municipalities in the extreme north-east of the country (Plav and Rožaje – 58.5% in Rožaje). There are also some municipalities in the central and southern parts of Montenegro that have particularly high unemployment rates (for example, Nikšić and Cetinje – about 26%–27%, as well as Bar, Ulcinj and Danilovgrad – about 21%–22%).

Youth unemployment (age 15–24) has varied between 35% and 45% (44% in 2012), and it was mostly twice as high as the overall unemployment rate. There is also a large number of young people who are neither in the education system, employed nor seeking jobs¹⁷.

The UNICEF Study on Child Poverty in Montenegro shows that children are more exposed to poverty than adults. Poor children are most frequently under five, from families with three or more children, children of single parents and children from multi-generation families, children whose parents only completed primary school or lower education levels, and children from families with

unemployed members. These are mostly children from the north, from rural areas or from the suburbs. Since 2008 the poverty rate in families with three or more children aged 0–6 increased by a factor of almost seven – from about 8% to almost 53% in 2011 (Figure 2-4). Thus families with more children felt the effects of the economic crisis more than the others and the fact that they are more sensitive to external impacts that can easily push them into poverty.

Figure 2-4: Poverty rate by number of children aged 0–6 in a household



Source: MONSTAT

Vulnerable groups. Roma and Egyptians are socially the most vulnerable population group. A UNDP report from 2009¹⁸ showed the poverty rate in this category was 36% (which is more than five times as high as for the whole country). They are followed by refugees/displaced persons with a poverty rate of 34% and social benefits users with 30%, retired persons with 15.7%, long-term unemployed with 12.3% and persons with disability with 11.9%.

Recent research conducted by CEDEM¹⁹ covering 701 respondents showed that more than 70% of the members of the Roma and Egyptian communities live in hardship with critically high unemployment rates, far below average incomes and very poor living conditions.

2.1.2 EXAMPLES OF KEY SUCCESSES

Kev successes recorded in relation to MDG 1 are a reduction in the unemployment rate (by about 10% in comparison to the middle of the last decade) and a reduction in the difference between the unemployment rates for men and women. The enablers of these successes include the fact that a lot of attention was dedicated to the improvement of the necessary knowledge and skills and to hard-to-employ categories of the population. Employment of the young and of long-term unemployed has been taken on as a priority. Programmes for encouraging development and employment in less developed municipalities and for development of women entrepreneurship have been or are being implemented. Financial support for employment is also available through agricultural and rural development projects of the Investment Development Fund (which supported about 150 projects of small and medium-size enterprises, entrepreneurs and farmers) and the Employment Agency (80 credits for 100 new jobs in 2012).

Although concrete results were not achieved in the field of the reduction of poverty and inequalities, a lot has been done on the improvement of policies and data availability. The process of the implementation of MDGs significantly contributed to these improvements, primarily in designing the social and childcare system and focusing on the poor and excluded groups.

2.1.3 CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF ACCESSION TO THE EU

Constraints. The negative trends in poverty can be explained partly by the fact that (as earlier poverty surveys showed) the economic position of a significant part of the

population was bad and that small changes in incomes and spending were sufficient for individuals and households to move from the category of being economically vulnerable to the category below the poverty line.

Poverty data shows that the social policy and social care system have not been fully successful in mitigating the effects of the economic crisis and reversing the negative trends, as well as showing that the results achieved in the period of growth were not used to ensure socially sustainable development in the long run. There is also an obvious lack of effective policies and measures for the reduction of disparities between and within regions.

Budget constraints caused by the crisis jeopardize the financing of social entitlements at the required level, as well as the sustainability of the existing social services and development of new ones. With a view to promoting some positive approaches, the new Law on Social and Child Care (May 2013) introduced further limitations of social rights, including for families that receive social benefits (family social support). Since these benefits are most frequently the only certain source of income for the poorest families, we can expect this measure to have a negative impact and to contribute to an increase in poverty. Currently, the maximum possible social benefits based on family support and child allowances (for a five-member family with three children, for example) amounts to only a few Euros above the poverty line, which was €175 in 2011. Crisis measures that are currently being implemented, such as freezing of pension levels and increasing value added tax also could have a negative impact on poverty.

Other constraints that have a negative impact on the provision of adequate social care are related to civil rights and administrative procedures (for example, regulating of the legal status of displaced persons and refugees) and inconsistent application of laws. In the opinion of the Coalition for Monitoring the Negotiations with the EU, for example, there are serious flaws in

the implementation of the Law on Employment and Professional Rehabilitation of Persons with Disabilities, and the funds that employers pay to the Fund for Professional Rehabilitation and Employment of Persons with Disabilities are not used purposefully²⁰. Inefficiency and weaknesses in the system of social and child care present another constraint and include centralization, bureaucracy and a lack of flexibility, insufficient coverage of beneficiaries (in relation to the needs), insufficiently developed services and insufficient inclusion of civil society and the private sector, paternalistic relations with the beneficiaries, insufficient knowledge and capacities, a lack of harmonization with international documents in all segments etc.²¹ The TransMonEE²² Report for Montenearo also showed that there is a lack of indicators and that there are weaknesses in the organization of collection of data important for social and childcare.

Employment constraints include a pronounced mismatch between supply and demand in the labour market, inadequate skills provided through the education system, lack of economic opportunities in certain areas, underdeveloped infrastructure, etc. Employment is not necessarily merit-based²³, which affects (in a negative way) job finding prospects and equal opportunities.

Future development directions. Further reforms of the social system should ensure efficient and effective use of the limited resources in order to reduce inequality and protection of the most vulnerable categories. The measures of social and economic policy have to ensure fair distribution of the burden of the crisis. Montenegro will have to have targeted policies for the north and for rural development. It will also have to implement measures for child care since the lack of effective action can cause vulnerable children to enter the cycle of poverty and disadvantages that are transferred from one generation to another.

According to the last EC Progress Report (2012), additional funds and capable human resources are required to implement and enforce the improved legal and insti-

tutional framework for social and economic rights. Montenegro needs measures and policies for poverty reduction and for improved inclusion of Roma and Egyptians as these groups still suffer discrimination. The report also underlined that the situation of public finances has a negative effect on reforms in the field of social policy.

In the field of employment, it is necessary to strengthen the capacities of the Employment Agency and develop the capacities of the unemployed (and those who are still in the education system) in line with the labour market's needs (through higher quality education and training). Greening of current incentive programmes for employment and entrepreneurship is also needed, as a green economy represents an opportunity for a generation of new jobs in sustainable economic activities and a move away from those that are financially or environmentally unsustainable. Montenegro needs to increasingly focus on youth unemployment.

All these efforts have to be guided by the against and recommendations of the relevant European documents -the Europe 2020 strategy, the communication Decent Life for All: Ending Poverty and Giving the World a Sustainable Future²⁴, the recommendation Investing in children: breaking the cycle of disadvantage²⁵, etc. The lack of satisfactory results in combatina poverty and social exclusion recorded so far and the possible failure or slow progress in overcoming the challenges underlined by the European Commission can significantly hinder the process of EU accession and reduce the prospects of achieving MDG 1 and the development goals that will become effective after 2015.



As a result of the efforts to develop inclusive education in the school year 2012/13 Montenegrin regular schools enrolled 3,600 children with special education needs. It is an improvement of as much as 537% in comparison to a decade ago when there were only 67 children with special education needs enrolled in regular schools. This goal is expected to be achieved by 2015, but Montenegro is already working on new priorities such as doubling the number of children included in pre-school education and ensuring a higher degree of quality of education.

2.2 MDG 2:

ACHIEVE UNIVERSAL PRIMARY EDUCATION

Nationally adapted targets and indicators for MDG 2 are:

- 1. Achieve coverage with pre-school education of girls and boys at a level of 40%;
- 2. Achieve 100% coverage with elementary education for boys and airls;
- 3. Reduce the illiteracy rate of people above the age of 10 to 1%.

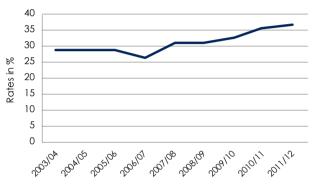
Montenegro is on its way to achieving the MDG 2 targets on pre-school and elementary education with a certain lagging behind regarding the coverage of Roma and Egyptian children and children with disabilities. The efforts to accelerate the progress and to reduce inequalities should come together with efforts to improve education quality, which will in its turn contribute to achieving the goals in the EU accession process. Montenegro is also on track for illiteracy targets.

The EU education goals are set in the Europe 2020 and Framework for European Cooperation in Education and Training (ET 2020)²⁶ strategies. ET 2020 aims at a much broader coverage of children with early education (95% of children above 4 and under school age) than the national MDG target. Other goals refer to the quality of knowledge and abilities that children acquire in primary school and the reduction of early dropping out.

2.2.1 TRENDS AND INEQUALITIES

The preschool enrolment rate has increased significantly (by about 10 percentage points) in the last ten years and the 2011/2012 rate of 37% was close to the target for 2015 (Figure 2-5).

Figure 2-5: Coverage of children with preschool education



Source: Second Annual Report on the implementation of MDGs

The primary school enrolment rates have also increased significantly since the 2003/04 school year when slightly over 92% of age-appropriate children enrolled and completed primary school. The growth was particularly strong up to the 2008/09 school year. Since then, the rate has exhibited minor oscillations in both directions (both up and down) on an annual level, but they generally showed a positive trend. The last available data (for the 2011/12 school year) shows that 98.3% of children enrolled in primary school and that 98.8% of children finished it, which is close to the target of 100%.

The Illiteracy rate has also decreased significantly to reach 1.5% (2011 Census) and is close to the target of 1%. The average age of illiterate people is 62; there are more women than men among them, while the highest rate at the municipal level was recorded in Rožaje and Ulcinj.

Inequalities. Pre-school coverage is much lower in rural areas and in the north, particularly among vulnerable groups of children including Roma/Egyptian children, children with disabilities, refugees and displaced persons' children and poor children. The ar-

eas with the highest poverty and unemployment rates (particularly female unemployment) have the lowest levels of pre-school enrolment rates²⁷. Disparities also exist when it comes to enrolment in and completion of primary school. Primary school enrolment is much lower among Roma and Egyptian children and among children with disabilities, however the trends for both groups have been very positive in the last couple of years. There are no significant gender differences in enrolment rates.

2.2.2 EXAMPLES OF KEY SUCCESSES

MDG 2 is fully incorporated into relevant strategic documents, which significantly contributed to attracting more attention to children with special education needs²⁸. As a result of efforts invested in the development of inclusive education, in 2012/13 a total of 3,600 children with special education needs were enrolled in regular primary schools – a huge success in comparison to the situation ten years ago when there were only 67 pupils from this category enrolled in regular schools.

In the last few years, the Ministry of Education has intensified cooperation with the non-governmental sector, particularly with organizations that deal with children and parents' associations, who have been partners in conceptualizing and the preparation of the inclusive education. This contributed to positive changes related to MDG 2.

Montenegro is currently implementing activities aimed at increasing the number of Roma and Egyptian children in pre-school and primary school education including by (i) opening pilot preparatory kindergartens; (ii) developing mechanisms for the prevention of dropping out; (iii) ensuring free textbooks and free transport (in some municipalities); (iv) defining possibilities for hiring Roma assistants; and (v) making a database on Roma and Egyptian children available and functional.

Development of inclusive education also increases the coverage of children with disabilities and creates better conditions for their full inclusion in kindergartens and reaular schools. Support for the children with special educational needs has improved: the concept of the emergence of a special educational need depends on how and to what extent the environmental factors facilitate or impede the functioning of a child; children work based on individual development and educational program: children from special classes are integrated into regular ones; specialized institutions have been transformed into three resource centres; new programs for children with disabilities have been prepared; teams have been formed for the training and support to inclusive education, and other significant activities have been completed.

2.2.3 CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF ACCESSION TO THE EU

Constraints. The vaguely defined mandate and insufficient capacities of the Council for the Rights of the Child hinders implementation of the Convention on the Rights of the Child. On top of that, there is no data disaggregated by age, gender, ethnic or social affiliation and urban/rural areas, thus lack of data accuracy hinder creating of systematic socio-inclusive policies. Another constraint for the implementation of MDG 2 is the insufficiently efficient implementation of the adopted laws and policies – strengthening of the capacities for implementation has been recognized as one of the key challenges in the relevant EU documents on Montenegro.

As for the concrete constraints that influence the achievement of MDG 2 (particularly task 1), the lack of premises or inadequate premises as well as specific social and economic conditions (like dispersed

settlements in the north, distance of the rural areas, poor transport infrastructure, the custom of living in multi-generation households, etc.) stand out²⁹.

Obstacles for better inclusion of Roma and Eavptian children and children with disabilities in education institutions are numerous. and include: unadapted buildings (in terms of physical access, organization of premises and work, use of adequate equipment and appliances); a weak system of early detection, diagnostics and intervention for the children with disabilities; a lack of support services at the local level; administrative procedures; an insufficient number of assistants for working with children; language barriers: cultural obstacles when it comes to Roma population (early marriage, insufficient importance attached to education and the connections between education and the future of children); an insufficiently developed system for monitoring and reduction of early dropping out.

The poverty among children represents a big obstacle (particularly with Roma and Egyptian children that frequently do not have basic means and decent conditions for life and are also limited by other problems, like poor health, child labour, insufficient support of parents and community, etc.). In the end, professionals – service providers for children with special educational needs, are not trained enough during their initial education and for the time of their professional development, about the specific nature of disabilities, working methods to be used when working with these children, stigma and discrimination.

A significant constraint for achieving target 3 is the fact that the illiterate people are mostly over 60 and often have a low interest in taking part in elementary functional literacy programmes.

Future Development Directions. In order to preserve and accelerate the progress made, Montenegro has to ensure strong and continuous support of all stakeholders, particularly from the public sector, for the improvement of the education system and for the increase of coverage of Roma and

Egyptian children, children with disabilities and other vulnerable groups. ET 2020 aims at a 95% preschool enrolment rate, which will be a significant challenge for Montenegro. The capacities of the Council for the Rights of the Child need to be strengthened, and the same applies to capacities for planning, implementation and assessing public policies for children.

Montenearo also needs to work systematically on the issues of education quality³⁰ especially within the context of EU accession. Current reforms are introducing mechanisms for the improvement and testing of abilities acquired during the education process, but there are no quantified goals for desired improvements. On the other hand, the general goal of the strategy Europe 2020 is to improve the education level of population, while ET 2020 aims at reducing the proportion of children under 15 that do not have sufficiently developed language, mathematics and science abilities to below 15%. The EC recommendation Investing in Children (February 2013) underlines the need to improve the influence of the education systems on equal opportunities i.e. on ensuring that all children can use the benefits of inclusive and high-quality education. European goals and priorities certainly outline the structure of the education system to be strived for in further efforts aimed at achieving MDG 2 and in the post-2015 period.



Despite a significant reduction in the difference between the unemployment rates for men and women achieved in the last decade, women are traditionally not guided to do jobs that bring higher incomes and more social power, since such jobs usually require more intense engagement which makes it difficult for women to match their role in the family with career demands. Therefore, the presence of women in managerial positions and other high-ranking posts and their willingness to start their own business are still at a low level.

2.3 MDG 3:

PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

National targets and indicators for MDG 3 are:

- 1. Economic empowerment of women (increasing the employment rate for women to 50%, i.e. reducing the unemployment rate to 9%) and
- 2. Increased participation of women in elected government bodies at the national and local levels to 30%.

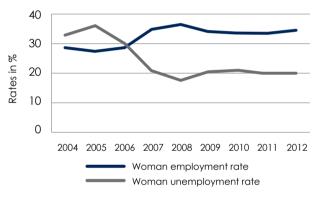
MDG 3 will not be achieved by 2015 since progress on all key indicators is lagging behind. Deviations are particularly high for the unemployment rate (which amounts to 20% and it is more than twice as high as the target value) and for the number of women mayors (below 5% in 2012, while the targeted value is 30%).

EU accession requirements include: promotion of women's rights and gender equality; guaranteeing equal salaries for women and protection of their employment rights; an increase in the representation of women in the elected government bodies at the national and local levels and in decision-making positions in the public and private sector; and the implementation of legislation on women's rights, particularly in the field of domestic violence. Measures for achieving gender equality are considered within several negotiation chapters/parts of the acquis. The national targets for this MDG are complementary to the requirements of the accession process, and faster progress towards the achievement of MDG 3 can also bring significant benefits to the accession process.

2.3.1 TRENDS AND INEQUALITIES

Economic Empowerment of Women. Indicators for the economic empowerment of women have shown some negative trends since the beginning of the economic crisis (e.g. a slight decline in employment). However, looking at the last decade, a significant positive change has been achieved from a situation where the employment rate for women was lower than the unemployment rate before 2006 to the reverse being the case after 2006. In 2012, the employment rate was higher than the unemployment rate by about 15 percentage points (Figure 2-6).

Figure 2-6: Trends in Employment and Unemployment Rate for Women for the Period 2004–2012



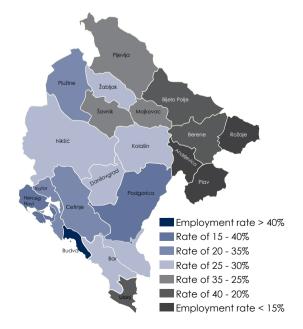
Source: MONSTAT

The representation of women in the parliament has been gradually increasing since the beginning of the last decade and reached 17% in 2012. In contrast, the representation of women in the government has varied significantly from periods with no female minister to periods with one-fifth of ministers being female. Participation of women in the elected government bodies at the national level has significantly increased since the last parliamentary elections (in October 2012). The situation is much worse at the local level since for a long time there has been only one woman at the head of local government (there are 21 municipalities). The proportion of women in the municipal assemblies has doubled in the last 12 years, but it is still far below the target value (one-third of the total number of councillors).

Inequalities. Geographical inequalities are very strong: opportunities for the employment of women are much lower in the north, in rural areas and in the less developed municipalities. According to data from the 2011 Census, the lowest employment rate for women was recorded in Rožaje (12%) while in as many as six Montenegrin municipalities (with 23% of the total population) less than one-fifth of women over 15 were employed at that time. With the employment rates in the range of 35%—44%, the municipalities of Tivat, Herceg Novi, Podgorica and Budva are closest to the target of 50% by 2015 (Figure 2-7).

The most vulnerable group is female members of the Roma and Egyptian populations. Due to traditions and specific social, economic and cultural conditions, they suffer double discrimination and face numerous obstacles in education and the development of their abilities, which reduces their prospects for employment and economic independence. In 2008, the illiteracy rate of Roma and Egyptian women was 55% (42% for men)³¹. There are almost no Roma and Egyptian women in prominent positions in public life.

Figure 2-7: Inequalities in the Employment Rates for Women by Municipalities according to the 2011 Census



Source of the map: Google; Source of data: MONSTAT; 2011 Census

2.3.2 EXAMPLES OF KEY SUCCESSES

Together with other global and EU policies, MDG 3 has significantly contributed to the integration of gender equality into national laws, policies, regulations and plans. Progress has also been achieved in institutional structures for achieving gender equality.

The key success within MDG 3 is a significant change in the ratio of employment to unemployment in favour of the employment of women (a total change of about 19 percentage points in the ten-year period), while in the same period the genderbased difference in the unemployment rates was reduced to 1% in favour of men (this difference was 10% in 2004). Progress was enabled by programmes of training and employment as well as an improvement in the educational structure of women, but can also be attributed to the fact that in the crisis more women had to work and that in such circumstances their abilities and entrepreneurial spirit became visible. There are also a significant number of programmes for support for women's employment (including for rural areas). They are implemented in parallel with the activities aimed at raising awareness of gender equality and other measures.

2.3.3 CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF ACCESSION TO THE EU

Constraints. Implementation of the Law on Gender Equality is still not satisfactory and the same can be said for the earlier strategic documents and plans in this field. There are no gender-disaggregated statistics in all areas, particularly in the area of violence against women. Apart from that, gender budgeting principles are not being implemented and, therefore, financing of most of

the activities for achieving gender equality depends directly on the support of international organizations³². In the opinion of civil society representatives³³ and of some political structures, new constraints for achieving gender equality have been introduced by the adoption of the Law on Social and Child Care. Its provisions are assessed as being contrary to the recommendations of the UN Committee on the Elimination of Discrimination against Women.

Other constraints for economic empowerment of women include: stereotypes in the selection of education profiles and vocations; traditional gender roles for women; prejudice and, as a consequence, lower professional aspirations; a lack of adequate support for women entrepreneurs. Women are traditionally guided towards jobs that are not highly positioned, since jobs that bring higher salaries and social power mostly require engagement that makes it difficult to match family duties and career. Thus only a small number of women start businesses or are found in decision-making positions and other highly positioned jobs.

As for participation of women in politics, the key constraints are still inconsistently implemented stimulative regulations³⁴, strong prejudice (in favour of men) about women/men in politics³⁵, insufficient support of the community and from women to other women, the fact that women perceive politics as an undesirable activity, etc.

Future development directions. Measures that have to be undertaken to make proaress and achieve MDG 3 are almost the same as the activities required in the EU accession process. In the opinion of the European Commission³⁶, steps have to be made to ensure consistent non-discrimination and gender equality in practice, including strengthening of supervisory bodies and more efficient response of the law enforcement agencies to possible violations. At the same time, awareness has to be raised and support measures strengthened, particularly in the employment and public representation of women. It is very important that the Plan of Activities for

Achieving Gender Equality in Montenegro 2013-2017 is implemented in a consistent way and therefore Montenegro has to ensure appropriate human and financial resources for that. National legislation has to be additionally harmonized with European and UN legislation and recommendations in the area of gender equality. Reduction of inequality within the female population will require continuous work with vulnerable groups, including women from rural areas, from the north, women with disabilities, elderly women and particularly Roma and Egyptian women. And last but not least -Montenearo needs continuous activities to raise awareness of gender equality and to empower women to strive for the positions/ jobs where decisions are made.



The planned goal of reducing child mortality was achieved in 2009, together with other relevant goals defined in the country and in WHO policies and strategies. Adequate monitoring and education of the population contributed to the achieving of the targets. Another contribution to the success was given by the fact that MDG 5 has been fully integrated into national health policy and programmes and into the measures for their implementation.

2.4 MDG 4:

REDUCE CHILD MORTALITY

National targets and indicators defined within this MDG for the reduction of child mortality are:

- 1. Reducing infant and under-five child mortality rates (per 1,000 live births);
- 2. Immunization of all 1-year old children (targets set depending on the type of the vaccine 37);
- 3. Reducing accident death rates for children aged 0-4 (to less than two cases annually out of the total population).

Targets 1 and 3 have already been met. Immunization trends show that Montenegro is also on-track for target 2 – the 2011 situation was very close to the targets if one takes into account the (downward) adjusted recommendations of the World Health Organization.

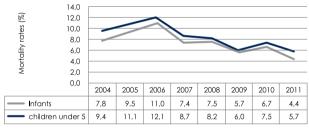
The adoption of the Law on Registers in 2010 and the changes it brought in the keeping of official statistics (failure to register mortality causes) hindered monitoring of a number of health-related indicators for MDGs, including accident-caused deaths of children aged 0–4 relevant to MDG 4. This problem was particularly underlined in the process of adoption of the Second Annual MDG Report and the Government adopted the conclusion on the basis of which by the end of 2013 the missing data will be extracted retroactively, while the issue of availability of the data in the field of mortality statistics will be completely solved by 2014.

Links between MDG 4 (as well as MDGs 5 and 6) with European policies are numerous. The WHO/European Health Policy: Health 2020 focuses on two key goals: 1) to improve health for everyone and to reduce inequalities; and 2) to improve leadership and participatory management for health³⁸.

2.4.1 TRENDS AND INEQUALITIES

The Child mortality indicators, i.e. the Infant Mortality Rate and the Under-Five Mortality Rate have been on a decline for the last ten years and since 2009 they have been below the targets for 2015 (7‰ and 8‰ respectively). Trends of these rates are presented in Figure 2-8. Immunization coverage has been increasing year after year and in 2011 it was in a range between 91% and 97%, depending on the type of vaccine. In 2011 the most significant deviation was for hepatitis B (91% in relation to the aoal of 97% by 2015). Accidents amona children aged 0-4 resulting in deaths is below 2 annually, which means that target 3 projected for 2015 has been achieved.

Figure 2-8: Infant mortality and mortality of children under 5 in the period 2004 – 2011



Source: MONSTAT

Inequalities. Health statistics are not organized in such a way that would enable analysis of inequalities for individual areas or groups of the population, nevertheless it can be said there are inequalities in health. It is obvious that disparities in education, employment, housing conditions etc. result in inequalities in achieving certain health outcomes. According to the 2013 National Human Development Report, the unemployed, displaced persons, beneficiaries of social and child care supports, and other socially excluded groups also face certain obstacles in their access to health care (i.e. related to the coverage of health services, medical standards, administrative procedures, etc.).

2.4.2 EXAMPLES OF KEY SUCCESSES

The planned goal for child mortality was successfully achieved already in 2009, as well as the relevant goals defined in WHO and national policies and strategies. The system of electronic recording of vaccinations has been introduced and that has ensured precise registration of all newlyborn and vaccinated children. Adequate monitoring of performed vaccinations and education of the population on the importance of immunization also contribute to the progress towards the target values. There are daily reviews of vaccination cards and additional immunization activities are carried out in order to cover all children with vaccination (including those who might not be vaccinated in the first place with other children of their generation).

2.4.3 CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF ACCESSION TO THE EU

Constraints. A significant constraint to monitoring MDG 4 (and also other health-related MDGs) occurred in 2010 when the changes introduced in the Law on Registers made it impossible to monitor causes of mortality. Steps have been taken to overcome this problem by 2014. But another constraint remains – the fact that current statistics do not reveal any information on inequalities by health indicators within general population. On top of that, monitoring programmes of health promotion and prevention of diseases is also hindered by inadequate registration of activities in health advice centres.

A constraint for immunization lies in the fact that not all children have their chosen physician yet and not all parents have been sufficiently informed and motivated to immunize their children. Factors influencing the fact that children do not have their chosen paediatrician include untimely or no registration in the social systems, and the social, economic and educational status of their parents. Another constraint regarding MDG4 is insufficient engagement of the multi-sectorial bodies responsible for the monitoring and evaluation of the activities defined in the National Action Plan for Children

Future Development Directions. In order to maintain the current achievements and to continue progressing towards achieving individual MDG targets, Montenegro has to improve health statistics and to further raise awareness on the importance of immunization, as well as to improve capacities of the health care system to develop and implement policies and programs which are evidence-based and results-oriented. In the process of nationalisation of future sustainable development goals, the immunization targets should be adjusted, i.e. reduced, which is in line with the new WHO recommendations (97% for BCG and 95% for all other vaccines: DTP, OPV and the vaccines against hepatitis B and measles). It is also necessary to improve coordination of relevant bodies and to ensure further implementation of the health system reforms aimed at priority care of vulnerable categories.

In accordance with the goals of the WHO/European health policy Health 2020 (improvement of health for all, reduction of health inequalities, improvement of leadership in health): it is necessary to improve the capacities for management in health at the level of the government (whole-government approach) and at the level of the society (whole of society approach); Activities aimed at promotion of children's health and prevention of diseases should be strenathened and sufficient funds should be allocated to prevention programmes. Due attention has to be paid to multi-sectoral action on social health determinants and the need to overcome inequalities in health. In this section, further involvement of the private sector is needed (the state, however, should continue to bear primary responsibility for basic health-care services and better coverage and access for socially excluded groups that are most exposed to health risks). It is also very important to continue working on the reduction of the child mortality rate with a view to coming closer to the values recorded in highly developed countries (for example the EU has less than 4 deceased infants per 1,000 live births). It is necessary to continue to develop and implement further measures for ensuring equality in access and quality of health services.



MDG 5 has already been achieved: Since the middle of last decade, all childbirths have been carried out with the assistance of health personnel and therefore there are almost no deaths related to pregnancy, childbirth or the period after childbirth. Together with the reduced child mortality rate this is probably the best progress Montenegro has achieved in the implementation of the MDGs. The maintenance of the achieved results has been supported by the opening of the Guidance Clinic for Female Reproductive Health and its positive effects are already visible.

2.5. MDG 5:

IMPROVING MATERNAL HEALTH

One national target (with corresponding indicator values) was set for MDG 5:

1. Preserving and improving reproductive maternal health (reducing the maternal mortality ratio to below 10 per 100 000 live births by 2015 and assistance of skilled health personnel during each childbirth).

MDG 5 has already been achieved as the maternal mortality ratio has remained below the target for several years. Since the middle of the last decade all childbirths have been assisted by skilled health personnel.

In relation to the accession to EU, the (already mentioned) aspects of reduction of inequalities and improvement of the efficiency of the health system also apply to MDG5.

2.5.1. TRENDS AND INEQUALITIES

The maternal mortality ratio was 0 during most of the 2004–2009 period. 2007 was an exception, when the last case of a death related to the pregnancy, birth or post-birth period was registered. The target associated with skilled health personnel assisting all childbirths were also met in almost every observed year (cf. Appendix 1).

2.5.2. EXAMPLES OF KEY SUCCESSES

The fact that in the last period there were almost no pregnancy-related maternal deaths while all childbirths were assisted by qualified health personnel represents a great success for the health system in Montenegro. Advice centres for reproductive health operating within the prevention services in the healthcare centres started working in 2009 and are an important component for maintaining these achievements. At the moment, there are 18 health advice centres and preliminary data shows that a considerable number of women are included in their activities and that they are satisfied with the services.

A contribution to this success also came from the fact that MDG 5 is fully incorporated into the national health policy and programmes and measures for their implementation. The issues relevant for the MDGs are still taken into account in the process of planning and implementing the healthcare system. Thus, for example, strategic documents pay particular attention to vulnerable population groups. It is also the case with the new Strategy for Preservation and Improvement of Sexual and Reproductive Health which is designed in such a way as to take into account the principles of health equity.

2.5.3. CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS

Weaknesses in the statistics, including the impossibility of continuous monitoring of the maternal mortality rate, are the key constraints for the MDG 5. It is necessary to enable again the monitoring and evaluation of data on women's deaths during preanancy, childbirth and post-birth period, as well as all the other data on these periods of life. In the aim of maintaining the achieved results, it is necessary to build capacity of relevant healthcare services, promote and further develop activities of advice centres for reproductive health and implement necessary measures in order to develop better understanding of inequalities and to reduce them. These efforts will at the same time contribute to the process of accession to EU.



Montenegro has been achieving great results in combating HIV/AIDS and tuberculosis, but the situation is worrying in the field of the target to reduce mortality caused by chronic non-communicable diseases. Along with the challenge of high mortality caused by cardiovascular diseases and malign tumours, Montenegro will also be faced with the challenge of other significantly modified trends related to the burden of disease in the field of mental health, antimicrobial resistance and financial sustainability of the health system. Health policy will also be shaped by social, cultural, environmental and political health determinants.

2.6. MRC 6:

COMBATING HIV/AIDS, TUBERCULOSIS AND OTHER DISEASES

National targets and indicators defined for MDG 6 are to:

- 1. Maintain a low HIV/AIDS prevalence rate (0.01–0.02) (HIV incidence lower than 1)39;
- 2. Reduce TB prevalence (drive the rate of newly registered cases per 100,000 inhabitants to below 20);
- 3. Reduce the mortality rate for chronic non-communicable diseases in the age group 0–64 years (to less than 400 cases per 100,000 inhabitants for cardiovascular diseases and less than 100 cases for malignant tumours).

Progress is on track for targets 1 and 2 while the situation is not satisfactory for target 3 where (at the end of 2009, which is last available data on mortality causes that we have) the levels were much higher than the projected targets for 2015: the mortality rate for cardiovascular diseases was 509 (the goal is 400) while it was 141 for tumours (the goal is 100).

The EU strategy Together for Health⁴⁰ considers health one of fundamental human rights and supports the goals of *Europe 2020*, since the good health of the population is considered to be a precondition for development of a smart, sustainable and inclusive economy.

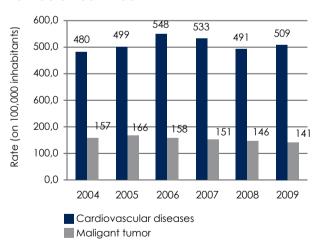
In the process of accession to the EU, it is chapter 28 (Consumer and Health Protection) that deals with issues such as control of tobacco use, non-communicable and communicable diseases and their implications for vulnerable groups, mental health and others. Issues relevant for MDG 6 (improvement of the healthcare system and reduction of inequalities) are the focus of the WHO/EU health policy Health 2020. The targets defined for MDG 6 are in line with the goals of other European documents, such as The European Heart Health Charter and The Commission Communication on Action against Cancer.

2.6.1. Trends and Inequalities

HIV/AIDS. HIV incidence ranged from 0.15 newly registered cases per 100,000 in 2004 to a high of 1.24 in 2009 and 2010, with rates generally showing a growing trend. The last available data of 0.97 for 2012 was below the 2015 target values and it presented a slight decline in comparison to the past few years (cf. Appendix 1). The rate of voluntary testing increased considerably by 2011. However, last year (2012) there was a certain decline that most probably resulted from the lack of rapid tests. The total rate of those tested in all healthcare institutions is over 35 per 1,000 inhabitants.

Tuberculosis. Tuberculosis prevalence shows a positive trend and all three indicators are heading in the right direction. The rate of newly registered cases per 100,000 inhabitants (15.8) in 2012 is already below the target value, while the prevalence of multi-drug-resistant tuberculosis and the mortality rate were somewhat higher than the set targets (cf. Appendix 1).

Figure 2-9: Trends of mortality rates for cardiovascular diseases and malignant tumours 2004–2009



Source: Public Health Institute

Non-communicable diseases. The mortality rates for cardiovascular diseases in the period 2004–2009 (data has not been available since 2010) grew modestly, while those for malignant tumours declined modestly (Figure 2-9). However, values for both indicators

are considerably higher than the targets set for 2015 – for malignant tumours, the rate in 2009 was 40% higher than the target.

Inequalities. For the time being, it is not possible to analyze disparities regarding indicators for MDG 6 (and other health indicators). However, the results of the 2008 National Population Health Survey⁴¹ show that the prevalence of preventable risk factors (such as smoking, alcohol abuse, inadequate nutrition, physical inactivity and obesity) that might lead to chronic non-communicable diseases (NCD) is high and that there are significant disparities between urban and rural households, by region and also depending on the level of well-being of households. Roma and, to some extent, the elderly (75 years and over) are in a much worse situation compared to the rest of the population.

2.6.2. EXAMPLES OF KEY SUCCESSES

As is the case with the other health-related MDGs, MDG 6 is incorporated into country-level health policy and measures and programmes for its implementation. Montenegro has successfully managed to control tuberculosis prevalence and to maintain a low HIV prevalence. The AIDS mortality rate is also maintained at a low level.

The efforts of the health system aimed at controlling communicable diseases contributed to the successes achieved in the last period. On top of that, in order to combat HIV/AIDS it is very important to include various stakeholders. Reforms and strengthening of the primary healthcare level, through the introduction of the concept of a chosen physician and establishment of support centres, are examples of good practice in combating diseases relevant for MDG 6. The centres for support include advice units for voluntary and confidential HIV testing, for nutrition, for the young, diabetes, etc. Through these organizational units the health services implement programmes for guitting smoking and they also plan to develop a programme for the prevention of complications caused by alcohol abuse. The National Guide for the Prevention of Cardiovascular Diseases was published, while the elective subject Healthy Lifestyles was incorporated into the school curriculum. There has been an increase in the number of projects launched by civil society aimed at promoting healthy lifestyles and renovating infrastructure in schools.

2.6.3. CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF THE ACCESSION TO EU

Constraints. Health statistics are not broken down by geographical regions and/or population groups. The situation is made more difficult by the fact that national population registers for cancer and other NCDs have not been created yet (which is a prerequisite for having precise data on the incidence, prevalence and mortality associated with these diseases). The National Programme for the Prevention and Control of Cardiovascular Diseases has not been adopted yet. There is no sufficient knowledge of the risk factors in the working and living environment and there is no valid data on the exposure of the population to carcinogenic substances. General constraints related to combatina HIV/AIDS and tuberculosis include low awareness of and prejudice towards diseases and deterioration of socio-economic conditions in the country.

According to the findings of the 2013 National Human Development Report, greater efficiency and effectiveness in implementing the reforms in the healthcare system would contribute to improving health and ensuring equality in access to healthcare services. Limited capacities and resources available in this process are some of the constraining factors.

Future Development Directions. To make additional improvements in relation to targets 1 and 2 and to reduce lagging behind in relation to target 3, it is necessary

to strengthen capacities for management, multi-sectorial cooperation and implementation of partnerships in health and for health. In order to create a health-promoting environment there is a need to reduce the risk factors, to continue strengthening the health system oriented towards prevention and control of NCD and related social determinants, to pay particular attention to primary health care, and to ensuring universal health care.

On top of that, Montenearo has to develop capacities for monitoring trends and NCD determinants and for evaluation of the progress achieved in their prevention and control. In that respect there is a need to improve health statistics and ensure capacities for disaggregation of data on NCD by socio-economic population categories in order to enable assessment of inequalities and measuring social determinants of health. Ensuring sustainability of prevention programmes to combat NCD and of primary health care are also challenges for the future. Particular attention and support should be provided for the implementation of the programmes for the control and prevention of cancer. In order to achieve improvements for the Target 3, it is recommended to set up a National Office for NCD Prevention and Control, as the main centre for developing and monitoring the implementation of policies; to urgently set up national population registers for the most important NCDs, and to set up a framework and define indicators for monitoring trends and assessing progress achieved through the implementation of the national strategies and the relevant plans in the prevention and control of NCD and their risk factors and social determinants: this should be in line with the auidelines contained in the WHO Resolution on comprehensive global monitoring framework and targets for the prevention and control of non-communicable diseases.

Faster progress within MDG 6 (particularly target 3) and overcoming the challenges to monitoring diseases and availability of data will be beneficial for meeting the requirements defined in the Chapter 28 and the WHO/EU health policy *Health* 2020.



The key constraints that hinder faster progress in this MDG are related to insufficient support for plans and programmes of environment protection, limited implementation of legislation and inadequate implementation of the mechanisms for the participation of all stakeholders in the development of national policies. The pressures to achieve fast economic benefits (based on natural resources and the financial crisis) influence the increase in the number of activities that are not sustainable. MDG 7 and the set of nationalized targets and indicators are compatible with the majority of European policies and regulations, including the climate and energy goals confirmed in the Europe 2020 strategy.

2.7. MDG 7:

ENSURING ENVIRONMENTAL SUSTAINABILITY

National targets and indicators for MDG 7 are to:

- Integrate principles of sustainable development into country-level policies and reverse the loss of environmental resources (the share of protected terrestrial and marine ecosystems to 10% and 3% respectively; forest cover of 54%; 35 exceedances of the allowed PM10 concentration in Podgorica per year; 5) emissions of 5.6 tonnes CO₂ eqv per capita; 6) gross domestic energy consumption of 262; 27.7% energy from renewable sources; the degree of anthropogenic impact on the quality of surface waters of 15%);
- 2. By 2015, reduce the proportion of people without access to drinking water and sanitation (reduction of losses in water-supply networks in urban settlements to 30%; connection to the sewerage network of 85%; and treatment of 60% of the total discharged waste water).

In spite of certain weaknesses in the environment statistics it can be seen that the values of indicators for both targets are moving in the right direction and that progress is being made. Nevertheless it is not realistic to expect the achievement of MDG 7 by 2015.

The set of national MDG 7 targets and indicators is compatible with a large number of European policies and regulations, including the climate and energy goals confirmed in the strategy Europe 2020 (reducing GHG emissions to 20% or 30%, increasing the share of renewable energy in the final consumption to 20% or increasing energy efficiency by 20%). Achieving the MDG target related to biodiversity protection would contribute to meeting the requirements of the demanding EU policies on the protection of habitats and species, while the MDG indicators for air quality are directly derived from transposed pieces of relevant European legislation. Achieving the MDG targets on the collection and treatment of waste waters would make a major contribution to the implementation of the EU directive on the treatment of the communal waste water.

2.7.1. TRENDS

For most of the ten MDG 7 indicators (cf. Appendix 1) the full data series for the observed period are not available. This makes it difficult to analyse trends, and to evaluate the effectiveness of policies. As was highlighted in previous MDG reports⁴², the quality and reliability of some data also pose a barrier to comparison and evaluation of the situation and developments in certain fields relevant for MDG 7.

As for <u>indicator 1</u> (the proportion of territory protected to preserve biodiversity), there was an increase to 9% in 2009 as a result of the designation of a new national park. If current activities on the expansion of the network of the protected areas on land are implemented, the target value of 10% by 2015 will be achieved or exceeded. There was no actual progress with <u>indicator 2</u> (the proportion of protected marine ecosystems) therefore there is a low probability (in spite of the numerous current activities and plans⁴³) that the planned value of 3% will be achieved by 2015.

A significant step forward was recorded in relation to indicator 3 where the proportion of forests and forestland increased from 54% to almost 70% thus exceeding the target value set for 2015. The increase can however be partly attributed to the fact that the new data is based on the actual situation derived from the first National Forest Inventory (NFI), which is prepared in alignment with internationally recommended (EU and FAO) definitions of forests and forestland, while earlier data was based on available forest plans and assessments done using various methodologies. The increase in the indicator value points to, but cannot be fully and unambiguously interpreted as, an actual increase in the forest area.

Indicator 4 - the number of times measured concentrations of suspended particles PM10 exceed limit values and tolerance thresholds in Podgorica – shows a downward trend (with some oscillations) in the period 2007–2012⁴⁴. If the appropriate measures for pollution control are not implemented, with further reduction of the tolerance threshold

(down to 0% by 2015), an increase in the number of exceedances may be expected in comparison to the values recorded in the last couple of years (which were below the MDG target for 2015).

Data on greenhouse gas (GHG) emissions (indicator 5) is available for several years for which inventories were prepared⁴⁵. Emissions of 6.5 tonnes CO₂ equivalent per capita in 2010 were around 15% lower than the 1990 level of 7.7. Getting closer to the target value of 5.6 tonnes CO₂ equivalent per capita in 2015 would be possible through implementation of intensive energy-efficiency measures and technological changes (with a higher share of renewable energy sources), but its achievement is not likely.

Values for indicator 6a on energy intensity, which suggest extraordinary progress, should be cautiously interpreted due to the mentioned weaknesses and inconsistencies in keeping energy balances in the previous period. The figure of energy intensity in 2010 being a third of the 2000 level (according to the data presented in Appendix 1) does not correspond to the situation on ground where significant progress was recorded (particularly in the period of intensive GDP growth), but with a much more modest trend. Instead, data from the Energy Development Strategy by 2030⁴⁶ which suggests that energy intensity decreased by 21% over the period 2000–2010 could be used for MDG 7 monitoring.

For the <u>6b indicator</u> (the proportion of renewable energy out of total energy consumption) two sets of data are considered – those from the official statistics and those from the Ministry of the Economy (the same as with the 6a indicator). Regardless of certain discrepancies, it can be said that there is a high chances of reaching the targeted value of 27.7% (it has already been reached according to the data of the Ministry of the Economy). The national target set within the framework of the Energy Community Agreement is 33% of energy from renewable sources by 2020.

In the last five years, the value of <u>indicator</u> 7—the anthropogenic impact on the quality

of surface waters (which is a percentage of exceedances of the limit values calculated as the ratio of the number of parameters on all measuring profiles that exceed the values allowed by the law and the number of representative parameters⁴⁷) ranged between 35% and 40% and it was significantly higher than the target value of 15%.

Finally, all the three indicators developed for target 2 - indicators 8, 9 and 10, i.e. losses in the water-supply network, the degree of connection to the sewerage network and degree of waste water treatment – demonstrated slight progress in the observed period, but they are far below the values targeted for 2015. According to the data of the Ministry of Sustainable Development and Tourism, losses in the water supply network in urban areas in the period 2005–2011 were expressed as a range (from the municipalities with the lowest and the municipalities with the highest losses) and in 2011 they were at the level of 32% - 72%(in comparison to 35% - 85% in 2005). The losses were for the first time expressed as an aggregate figure for 2012 (for the water supply networks in the urban settlements in all municipalities) and they amounted to 57%, which is almost twice as high as the target value of 30%. After several wastewater treatment plants start working, which is expected to happen by 2015⁴⁸, a significant increase in the percentage of treated wastewaters will be achieved (from the current 18%). Therefore, it is assessed that the achievement of or getting near to the target value of 60% is possible.

2.7.2. EXAMPLES OF KEY SUCCESSES

Partnerships with the governments of other countries, international organisations and financial institutions, as well as a large number of projects implemented through cooperation of all the stakeholders resulted in notable progress in several areas of importance for MDG 7. Environmental sustainability is considered during adoption

of development plans and formulation of development agenda, though this is often more at a formal than practical level. Public awareness about the importance of sustainable management of natural resources is now at a considerably higher level than was the case ten years ago, while civil society has made a considerable contribution to the integration of environmental concerns and sustainability requirements into development policies. MDG 7 is complementary to relevant policies in the country⁴⁹, which has a positive impact on implementation.

In the area of biodiversity protection, considerable progress has been made with the preparatory documentation for designation of new protected areas and for the expansion of the system in such a way that would ensure the presence of various ecosystems and their representativeness. The proportion of the land covered by forests in the total territory has increased significantly; at the same time the framework for sustainable planning and managing forests has been improved.

The framework for implementation of energy-efficiency measures was improved through the adoption of relevant regulations and plans. Progress has been achieved on a number of energy and climate change indicators⁵⁰, which is very encouraging from the point of view of sustainability. Nevertheless, certain part of the achieved results can be attributed to spontaneous improvements such as, inter alia, the reduction of GHG emissions was partly caused by a downturn in industrial production, decline in the energy intensity by the high GDP growth rate in the period 2006–2008, etc.).

Significant funds for the improvement of environmental infrastructure (systems of water supply, discharge and treatment of waste waters) have been provided through the credits of international financial institutions (KfW, EBRD, EIB, World Bank), IPA funds and other donations. Losses in water supply systems have been reduced, although they are still at an unacceptably high level in

many municipalities. In a large number of municipalities there are on-going activities on the preparation of design documentation and/or reconstruction and enlargement of wastewater systems, i.e. on the preparation for the construction of wastewater treatment plants. Projects for improvement of the sewerage systems have recently been finished or are in progress in the municipalities of Nikšić, Tivat, Kotor and Herceg Novi. A positive example is the Municipality of Tivat that has significantly improved its wastewater system in the last couple of years and as one of the municipalities that used to have the lowest level of connections to the wastewater network it reversed the situation and reached a satisfactory level.

2.7.3. CONSTRAINTS AND FUTURE DEVELOPMENT DIRECTIONS IN THE CONTEXT OF ACCESSION TO THE EU

Constraints. The main constraints preventing faster progress towards the achievement of MDG 7 targets are related to the limited support to environment protection plans and programmes, ineffective implementation of regulations, and inadequate application of mechanisms for the involvement of all stakeholders in policy development. Pressures to generate quick economic benefits, inadequate capacities for in-depth assessments and balancina of environmental and social against economic impacts are other factors inhibiting progress, together with extended support for environmentally unsustainable projects and activities. Weaknesses of environmental statistics – lack of time series obtained using the same methodological procedures, lack of certain data and inaccuracies – make another important constraint for monitoring MDG 7 and for formulation of appropriate measures to accelerate progress.

As for protected areas, the main constraints are related to solving potential conflicts in the process of designation and placing certain territory under protection through consultations with all the stakeholders, as well as to securing the necessary resources for adequate management. The main challenges in maintaining current situation, where a almost 70% of the national territory is covered with forests and forest land, are: building of the capacity for sustainable planning and forest management (including improvement in the coordination between the parts of administration responsible for forest management and biodiversity protection) and consistent implementation of plans and regulations.

Obsolete technologies and lack of emission reduction equipment, inadequate application of market-based emission control instruments (such as emission taxes and fees, emission trading schemes etc.) and a lack of stronger support for implementation of energy-efficiency measures are the main obstacles to achievement of targets related to air, energy and climate change. These constraints are also very important for harmonization with the relevant EU policies.

Preparation of high-quality environmental infrastructure project documentation and its review, setting up spatial planning prerequisites for implementation of projects and resolving ownership issues, as well as designing the most favourable project financing models are some of the key constraints for target 2. Improvements in this area will require large investments: necessary investments for wastewater projects are, for example, assessed at about €560 million by 2028.

Future Development Directions. Capacity building and ensuring adequate support (political, financial and human resources) for the achievement of MDG 7 target values is the key recommendation for the future. Improvement of inter-sectoral coordination and cooperation is also very important for achieving progress, which also includes better application of environmental management mechanisms and

instruments such as impact assessments, market-based instruments, etc. It is also necessary to establish mechanisms and to provide tools for full participation of the citizens and civil society in the decision-making processes.

To improve MDG 7 monitoring it is necessary to use more reliable data on energy intensity and consider introduction (over time) of other air quality indicators (e.g. for urban areas that traditionally have air pollution problems and/or for other polluting substances).

Achieving the values of the majority of MDG indicators is very important also for the process of accession to the EU, since they are at the same time measures of success in the implementation of a number of European policies and regulations, including climate and energy policy, nature protection directives, drinking water and urban wastewater treatment directives, and other parts of the acquis. As underlined in several EC Progress Reports, harmonization with the acquis in the field of the environment and climate changes (Chapter 27) is slow.

Achieving the MDG target of 5.7 t CO₂eqv/ capita by 2020 would mean a reduction of 26% compared to 1990 GHG emissions, which is in line with European policy. To 2010, an actual emission reduction of 15% has been achieved. Reaching the target value for 2020 is possible if more intensive energy-efficiency measures are implemented. Further efforts to reduce energy intensity are very important not only for environmental sustainability, MDGs and the process of accession to the EU, but also for the competitiveness of the economy. As for the share of energy from renewable energy sources, Montenegro has already exceeded the European goal of 20% and it has a good chance of achieving the national goal of 33% by 2020.

As for wastewater treatment, MDG targets are, in principle, in line with the requirements of the directive on urban wastewaters (according to which the waste waters of every settlement with more than a 2,000 population equivalent should be treat-

ed). Accession to the EU and negotiations about this part of Chapter 27 will generate stricter obligations but will also give an additional impetus for achieving the MDG targets – through definition of deadlines for reaching the appropriate degree of treatment and through creation of possibilities for receiving pre-accession funds for environmental infrastructure.



Through implementation of joint cross-border and trans-national projects, the country has created regional and trans-national partnerships. In this way common challenges are being met, while the capacities of all stakeholders are strengthened. Progress has also been made in the implementation of information communication technologies. E-education, E-health services, and E-inclusion are being developed with a view to encouraging all elements of society to use modern technologies. As for the public administration, the programme of e-government is being developed with a view to improving the quality of the services provided by state bodies.

2.8. MDG 8:

DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT

MDG 8 is monitored in the following two areas:

- 1. Coordination of international donor assistance: and
- 2. Development and use of information and communication technologies.

It may be concluded that significant progress has been made in both of these areas in the previous period and that MDG 8 will very likely be achieved by 2015 (even though quantified monitoring targets have not been set here).

Donor Assistance. The IPA (Instrument for Pre-Accession Assistance) is currently being managed by the EU Delegation in Podgorica, and the process of decentralization of the management of IPA components I and II is in its final stage. All the required institutional structures were set up and informed about the procedures that would be followed in the decentralized system. The necessary documentation for the accreditation package for the components III and IV has been prepared and was officially sent to the EU in March 2013⁵¹.

In the framework of IPA component I 2007-2013, the EC granted more than €152 million to Montenegro through 96 national projects, while government co-funding amounted to €93 million. The total allocated IPA funds for 2012 and 2013 are at the level of €35 million and they are intended primarily for projects in the field of the rule of law, public administration reform and environmental and climate change (which means that they are relevant for achieving several MDGs). In the framework of IPA component II, the country participates actively in bilateral programmes with neighbouring countries, as well as in programmes with EU member states. Programming of cross-border and transnational programmes for the period 2014–2020 is expected in 2013. Implementation of joint cross-border and transnational projects enables establishment of regional and transnational partnerships, resolution of common challenges and institutional capacity building. Availability of the IPA funds is expected to grow in the next 5–10 years if the capacity of the country for absorbing these funds is developed at the required pace.

Over the last several years, coordination between donors and representatives of international institutions has been improved, while a formal mechanism for cooperation and coordination between the government and donors has been set up and managed by the Ministry of Foreign Affairs and European Integration. The structure of donors significantly changed, since last year some of the long-term programmes closed (USAID, SNV, GIZ, etc.). Therefore, EU funds are even more important.

The key challenge in the future period will be the functioning of all the established structures in order to be able to use available IPA funds efficiently. The need to build administrative capacity in IPA structures and to prepare them properly for the future is highlighted in the last EC report on the progress of Montenegro in the accession process.

As for the development and use of *information and communication technologies*, according to the latest surveys, Montenegro ranks first ahead of the other countries of the region (Bosnia and Herzegovina, Serbia, Albania, Croatia, Macedonia) in terms of mobile telephone penetration, mobile broadband access and overall broadband access.

According to the results of a survey of the usage of information and communication technologies conducted by the Ministry for Information Society and Telecommunications and MONSTAT⁵², almost 59% of the population used computers in 2012, while 34% never used computers. 57% of people said they were Internet users, of whom 81% were regular users (every day or almost every day). Compared to 2011, there has been an increase in the number of computer and Internet users.

According to the official data, 46% of households use broadband Internet connections. Landlines are 100% digitalized (natural persons account for 87% and legal entities for the remaining 13% of all connections). Mobile telephone penetration amounts to almost 160%.

For this area the EU policy has a wider scope of action than MRC, and the Digital Agenda for Europe (DAE 2020) is a key document for the development of information and communication technologies.

The Action Plan for the development of e-government for the period from 2013 to 2016 is in the preparation phase. Also, the Ministry for Information Society and Telecommunications initiated activities to define the legal and normative regulations in the field of e-government. The intention was to create conditions for further development of electronic government in Montenegro, by applying the standards and quality in alignment with EU requirements. Consequently, responsibility of the competent authorities would be defined, as well as the model for the data exchange between digitalized registers, and the way of sharing data between existing information systems.

For the field of ICT, which is intended for the community, e-learning, e-health and e-inclusion have been developed, aimed at encouraging all community members to use modern technology.

2.9. NEW CHALLENGES FOR DEVELOPMENT POLICIES IN MON-TENEGRO

A number of new challenges have appeared over the last five years (manifested at global or national levels, or both) that may have a considerable impact, or already have an impact, on the achievement of MDGs, EU membership and the development opportunities of Montenegro in the long run. The following are the most relevant challenges:

Extended duration and new impacts of the economic crisis: Economic recovery that was recorded in 2010 proved to be insufficient for launching the new development

cycle, while available growth projections are not encouraging either. In addition, a number of problems that have accumulated over the past few years threaten to jeopardize the financial stability of the country. In such conditions, implementation of anti-poverty policies, reform of the social welfare system, education and health sectors and implementation of environment policies are facing difficulties.

Corruption and growing inequality in the society: Some of the most important challenges (that may be considered new as they are current issues) that have been identified and highlighted in the EU association process include respect for the rule of law and anti-corruption. Inconsistent application of regulations and inequality lead to larger disparities, while corruption undermines prospects of a society to promote and uphold the best development solutions and to maximize development opportunities for all its members, as well as the prospects of each individual to exercise rights and make use of potentials to the highest extent possible. The effective fight against corruption requires appropriate capacity, but also the commitment (political will).

Child poverty and youth unemployment: Children and youth are increasingly becoming vulnerable to transition processes and crises within the Montenegrin society. Children are more exposed to poverty than adults while the youth unemployment rate has been extremely high over the past few years. Particularly concerning is the significant increase in the youth employment rate from the beginning of the crisis to today (about 10 percentage points). Child poverty is specific since its impact on child development is irreversible and leaves long-term consequences: it leads to worse school performance and health conditions. children become more vulnerable to economic shocks, accidents, even to exploitation and abuse, and all this contributes to passing poverty down from one generation to the next. The unfavourable position of children and youth has a negative impact on human capital and the long-term development opportunities of a society.

Economic competitiveness, innovation and technological changes: Economic competitiveness is an outcome that several European policies seek to achieve, including those related to the existence of a functional market economy, employment, human and physical capital, research, industry and enterprises, etc. On the Global Competitiveness List for 2012/2013, Montenegro ranks 72 on the list out of a total of 144 countries.⁵³ The Europe 2020 strategy refers to 'smart' development based on a areater scope of investments in education. research and development, and the EC highlights science and technology as one of the major drivers of inclusive and sustainable growth.

Challenges identified by the latest EC Progress Report which have an impact on competitiveness include a lack of credit, exposure of public finance to the risk posed by the over-indebtedness of the Aluminium Plant, the quality of education and capabilities of the labour force, an insufficiently developed infrastructure, the significant size of the grey economy, etc. Even though the conditions in the economy and the prolonged economic crisis are constraining factors, proper selection of policies and support instruments make it possible to initiate the process of applying new technologies in order to ensure sustainable development and make a contribution to economic competitiveness. As shown by success in the application and use of Information and Communication Technologies (ICT), technological steps forward are possible.

Climate change: According to the findings of the document A Decent Life for All, the global economy is not on track to keep temperature increases within 2°C above the temperature in pre-industrial times, which represents the threshold beyond which there is a much higher risk that catastrophic impacts on natural resources will occur. Already today, climate change, depletion of natural resources and ecosystem degradation are having significant negative impacts on livelihoods.

Available information reveals that significant changes of basic climate parameters (temperature and precipitation) may be expected in Montenegro in the twenty-first century as a result of global emissions. Preliminary assessments of the resulting damages in various economic sectors (such as tourism and hydroelectric power generation) show that losses might be considerable. The existing assessments also indicate that energy-efficiency measures and application of the new technologies may lead to a considerable decrease in greenhouse gas emissions and generate a number of economic and social benefits.⁵⁴

As already mentioned, the EU climate and energy policy (incorporated into the Europe 2020 strategy as well) is based on the 20-20-20 goals (reduction of GHG emissions, renewable energy sources and improvement of energy efficiency) by 2020. Even though Montenegro is progressing well in terms of achieving some of these goals, for the others it is necessary to provide strong support at the national level – not only in terms of the existing energy generation and consumption patterns, but also in terms of plans for further development of the energy sector. Climate change (mitigation and adaptation) has not been properly incorporated into sectorial policies yet.

3. POST-2015 DEVELOPMENT PRIORITIES

Post-2015 development priorities include getting closer to the MDGs that have not been achieved yet and setting new priorities and sustainable development goals at the national, regional (EU) and global levels. Montenegro actively participates in the global debate on Sustainable Development Goals (SDGs) for the UN Post-2015 Development Agenda. European policies and legislation present a key drive for political, economic and social reforms in the country. National consultations on post-millennium development priorities identified eight areas that should serve as the basis for Montenegro's future development agenda. The new goals set are in the field of: 1) the economy, unemployment, revenues and balanced regional development; 2) the fight against crime, corruption and nepotism; 3) the health; 4) equality; 5) environmental protection; 6) developing infrastructure; 7) education; and 8) social values. Their achievement will require an integrated, inter-sectorial and multidimensional approach. The people of Montenegro believe that in the coming period Montenegro should work on the strengthening of the social capital based on solidarity, family values, tolerance, respect for others and non-discrimination.

The focus of this chapter is (i) on the MDGs that are not likely to be achieved and the lessons learned in the process so far; and (ii) on the new priorities that are being introduced in the development agenda at the national, regional (EU) and global levels in the process of defining the post-2015 sustainable development goals. The chapter will also consider the national consultations on the post-2015 priorities.

3.1. Unfinished Business

Montenearo is makina good progress towards achieving the Millennium Development Goals (cf. Table 4-1) except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability), parts of MDG 2 (coverage of vulnerable groups) and MDG 6 (the mortality rate caused by chronic non-communicable diseases). To make further progress, there is a need to strengthen the focus on inequalities and social exclusion, particularly in the north, in rural areas and amona the Roma population. Poverty trends are worrying and indicate that Montenearo needs to analyze the effectiveness of existing policies and make urgent improvements in social and employment policies. There is strong formal support for environmental sustainability, but it has not been sufficiently implemented in practice. Montenearo also has to overcome weaknesses regarding disaggregated statistics and cross-sectoral coordination. It has to further improve the implementation capacities and the system of effective and transparent governance, work on quality aspects as well as find ways to overcome and alleviate the consequences of the budget constraints caused by the financial crisis.

The lessons learned from the implementation of the MDGs are very important both in contributing to the EU accession process and in contributing to the implementation of the expected post-2015 Sustainable Development Goals (SDGs). Lessons learned include the importance of: (i) cross-sectoral

cooperation given the multidimensional character of the MDGs; (ii) re-evaluating policies and practices that are counterproductive or unsustainable: (iii) recoanizing negative trends in a timely manner through reliable disagareaated statistics and corresponding analysis; (iv) increasing focus on inequalities and socially excluded populations (i.e. the north, rural areas, Roma and Egyptians, etc.); (v) increasing focus on qualitative aspects in all sectors, including health and education (as augntitative targets are being achieved); and (vi) increasing focus on awareness raising and people's knowledge, attitudes and practices in order to stimulate behavioural change on an individual, community and societal level. This last lesson learned seems to apply to all MDGs including: MDG 2 (where negative attitudes, stigma and discrimination are still found); MDG 3 (to fight stereotypes and unconducive gender roles); MDG 6 (where lack of knowledge and prejudice is still found); and MDG 7 (where there is a need to continuously increase public awareness).

3.2. NEW PRIORITIES FOR THE MONTENEGRIN DEVELOPMENT AGENDA

Development priorities in Montenegro are being modified and/or fundamentally changed based on: (i) the evolving situation in the country; (ii) the EU adaptation process; and (iii) global post-2015 processes. The health sector, for example, is now moving from "traditional" MDG issues like communicable diseases to a «new» agenda prioritizing chronic non-communicable diseases, mental health, anti-microbial resistance and financial sustainability of the healthcare system.

New development priorities have been established through numerous **country policies and strategies** adopted over the past

couple of years or which are in the process of being adopted. While preparations are underway for updating the National Strategy for Sustainable Development for the period 2014-2020, the recently adopted national development plan – Montenearo Development Directions 2013–2016 (MDD) - addresses a large number of development issues relevant for the MDGs and beyond. The MDD sets priorities and introduces measures for 18 policy fields, placing particular emphasis on the development of a green economy as a horizontal topic and underlines links and compatibility with the Europe 2020 strategy. An overview of the MDD goals relevant for this Report is given in Table 3 -1, with references to the corresponding MDGs and the goals of the Europe 2020 strategy.

Table 3-1: Overview of Goals for Selected Policy Fields: Montenegro Development Directions 2013–2016

Areas ar	nd goals defined in the Development Directions for Montenegro	Corresp goa	
Policy field	Main goal	MDG	Eu- rope 2020
SME	Competitive SME sector in an entrepre- neurial economy based on knowledge, technical innovation and modernized capacities	MDGs 1–3	Goals 1, 2 and 4
Competi- tiveness and FDI	Promotion of foreign investments and internationalization		
Science	Build capacity for science and research activities	MDG 2	Goal 2
Energy	Meet the needs for energy by minimiz- ing costs and environmental impact; increased energy efficiency, increased security and quality of the electricity power supply	MDG 7	Goal 3
Agricul- ture and rural develop- ment	Sustainable resource management, stable and safe food supply, improved standard of living for the rural popula- tion	MDGs 1 and 7	
Forestry	More efficient use of forest resources, ensuring long-term resistance and productivity of forests	MDG 7	
Environ- ment	Nature and biodiversity protection, minimizing air pollution, protection of water quality	MDG 7	
Labour market	Higher employment rate of the active labour population	MDGs 1 and 3	Goal 1
Education	Improving education quality	MDG 2	Goal 4
Social welfare	Social inclusion and eradicating poverty	MDG 1	Goal 5
Health care	Preserving and improving the population's health in Montenegro	MDGs 4–6	

EU priorities. In the discussion of individual Millennium goals in Montenegro, consideration has already been given to the crucial European documents and policies⁵⁵ whose goals are increasingly binding for the country in its EU accession negotiations. Many of these policies refer to the post - 2020 period and, as mentioned earlier, represent the key driving force of the political, economic and social reforms in Montenegro.

The Europe2020 strategy gave a strong impetus to the efforts to resolve issues of poverty and social exclusion in the EU and to base further growth on sustainability principles. Child poverty, early school dropping out and youth unemployment make up an integral part of the Platform against Poverty and Social Exclusion.⁵⁶

European education policies promote high-quality basic education for all children, youth and adults. The key goals of the European health policy are to improve health and reduce inequalities, while European priorities in the field of gender equality include economic independence, equality in decision-making, eliminating gender stereotypes, equal pay, etc. In terms of the environment, the European Union is implementing a complex set of policies for various topics and fields - from integrated water resources management and air quality management to climate change and ecosystem protection. The Europe 2020 strategy promotes low-carbon development, efficient use of resources and sustainable industry.

Environmental priorities are also elaborated in the Conclusions of the Council of the EU⁵⁷ that refer to setting the post-2015 development framework. The Council confirmed commitment of the EU member states to the Millennium Goals and the outcomes of the Rio+20 summit, namely: sustainable development, poverty eradication and a green economy as fundamental elements for building a new global development agenda.

Global priorities. Montenegro, in pair with Slovenia, participates in the activities of the **UN Open Working Group – OWG** which is

engaged in setting global Sustainable Development Goals (SDGs) for the post-2015 UN development gaenda. Contributions made so far to this global debate suggest the transformation of the Millennium Development Goals into Sustainable Development Goals and the keeping of the key concepts while upgrading and extending the focus in certain areas. The UN-promoted High Level Panel recently published a report on the new post-2015 development agenda with the following key messages: no person should be left behind; put sustainable development at the core; transform economies for new jobs and inclusive growth; build peace and effective, open and accountable institutions for all and forge a new global partnership. The report also calls for a "revolution" when it comes to data for sustainable development.

National priorities. Consultations on the post-millennium development priorities, that included more than 8,000 people, were also conducted at the national level at the end of 2012 and beginning of 2013. Eight key issues that should serve as the foundation for laying down development principles were identified: 1) the economy, unemployment, income and equitable regional development; 2) combating crime, corruption and nepotism; 3) the health sector; 4) achieving equality; 5) preserving the environment; 6) developing infrastructure; 7) the education sector; and 8) strengthening the value system.

In the national consultation process it has been recognized that better planning and implementation of policies is needed. Most of the respondents expressed the opinion that the gap between the poor and the rich is getting wider at a worrying pace and that it undermines the core of the society. The environment was identified as one of the key advantages and opportunities of Montenegro, but was seen as being rapidly destroyed. A need to transform the education system was identified in order to ensure: improved quality of education, applicability of acquired knowledge, strengthening of social and practical skills and abilities, and forming of critical opinion. The respondents also expressed concerns regarding changes in the value system underlining that the social capital has to be strengthened on the basis of solidarity, family values, tolerance, respect for others and non-discrimination⁵⁸

4. CONCLUSIONS AND RECOMMENDATIONS

Montenegro is on the right track to achieving the Millennium Development Goals, except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability). Additional efforts will be needed for the part of MDG 2 that deals with coverage of vulnerable groups and for MDG 6 (the rate of mortality caused by chronic non-communicable diseases). In order to achieve further progress, Montenegro has to dedicate more attention to inequalities and social exclusion. It has to monitor the implementation of existing policies and ensure implementation of concrete measures for achieving sustainability. It is particularly important to strengthen statistics and inter-sectorial coordination, as well as to improve capacities for implementation and the system of effective and transparent governance, to ensure that quality services and good solutions will overcome and mitigate consequences of the budget constraints caused by the crisis. It is also very important to strengthen the impact on the causes that are not of an economic nature, through awareness-raising activities and through enhancement of knowledge, attitudes and practices in order to stimulate changes in the behaviour of individuals, the society and state and ensure sustainable and inclusive arowth.

4.1. IMPLEMENTATION OF INDIVIDUAL MDGS – STATUS AT A GLANCE

Based on the previous chapters, Table 4-1 gives a concise overview of (i) the likelihood/feasibility of achieving the MDG targets; (ii) recent trends; and (iii) an assessment of the level of national support⁵⁹. As can be seen, Montenegro is making good progress towards achieving the Millennium Development Goals except for MDGs 1, 3 and 7 (poverty reduction, gender equality and environmental sustainability), parts of MDG 2 (coverage of vulnerable groups) and MDG 6 (mortality rate caused by chronic non-communicable diseases).

MDGs 4 and 5 with targets on child mortality and maternal health have already been successfully achieved while the MDG 2 targets on general preschool and primary school coverage and illiteracy, the MDG 6 targets on HIV/AIDS and TB prevalence, as well as the MDG 8 targets are all on-track to be achieved by 2015. Trends within these goals are mostly positive or have flattened out, while the support was assessed as strong or substantial.

In regard to MDGs 1, 3 and 7, substantial support was provided only for reducing unemployment (MDG 1), women's economic empowerment (MDG 3) and the target for the water supply and waste waters (MDG 7). While some targets for MDGs 3 and 7 are showing positive trends, they are deemed insufficiently strong to achieve the set values by 2015. In order to make further progress there is a need to strengthen the focus on inequalities and social exclusion, particularly in the north, in rural areas and among the Roma population. Poverty trends are worrying and indicate that Montenegro needs to analyse the effectiveness of the existing policies and make urgent improvements in social and employment policies. There is strong formal support for environmental sustainability, but it has not been sufficiently implemented in practice. Montenegro also has to overcome weaknesses regarding disaggregated statistics and cross-sectoral coordination. It has to further improve the implementation capacities and the system of effective and transparent governance, work on quality aspects as well as find ways to overcome and alleviate the consequences of the budget constraints caused by the financial crisis.

Table 3-1: Status of Achievement of MDGs

			Assessm	ents	
Goals	Targets by 2015	Will the goal be achieved?	Trend	Support	
ate	Halve the proportion of people living below the poverty line		↓	Weak	
1: Eradic poverty	Reduce inequality in the distribution of consumption		↓	Weak	
MDG 1: Eradicate poverty	Reduce regional disparities in development (halve poverty rates in the northern region and in rural areas)		↓	Weak	
M	Reduce the unemployment rate to 9%		\rightarrow	Substantial	
. a	Achieve 40% coverage of girls and boys by preschool education		↑	Strong	
MDG 2: Universal primary education	Achieve 100% coverage of boys and girls by primary education		1	Strong	
2 2 9	Reduce the illiteracy rate of people older than 10 years of age down to 1%		1	Substantial	
MDG 3: Gender equality	Women's economic empowerment		1	Substantial	
MDC Gen	Increase women's participation in elected government bodies at national and local levels		1	Weak	

			Assessm	ents
Goals	Targets by 2015	Will the goal be achieved?	Trend	Support
ŗ	Reduce indicator value to eight infant deaths per 1,000 live births		1	Strong
MDG 4: Reduce child mor- tality	Immunisation of all the children younger than one year of age		1	Strong
Re Chi	Reduce mortality caused by accidents for children aged 0 to 4 years		\rightarrow	Substantial
MDG 5: Ma- ternal health	Preserve and improve maternal reproductive health		→	Substantial
om-	Maintain the low HIV/AIDS prevalence rate		\rightarrow	Substantial
MDG 6: Com- bat diseases	Reduce tuberculosis prevalence		1	Substantial
MDC bat c	Reduce the mortality rate for chronic non-communicable diseases in the age group 0–64 years		\rightarrow	Weak
۶۶: en- -ر t	Integrate principles of sustainable development into country-level policies and reverse the loss of environmental resources		↑ / →	Weak
MDG 7: The en- viron- ment	Reduce the proportion of people without access to drinking water and sanitation		↑/ →	Substantial
s 8: ent ner-	Coordination of international donor assistance		1	Substantial
MDG 8: Devel- opment partner- ships	Development and use of information and communication technologies		1	Strong

Colour code: **green –** goal **is achieved**; yellow – achievement of the goal is **possible**; **red** – achievement of the goal is **not likely.**

Arrow code: up - positive trend; right-stagnation; down -negative trend

The failure in achieving certain goals and targets is often linked to poor support, indicating that the concerned stakeholders, particularly the decision-makers and public administrations, have not provided a sufficiently strong response to reverse the negative trends. Poor achievements are also often linked to the adoption of counter-productive/unsustainable policies or the failure to implement policies that could give good results. Representatives of civil society may contribute to improved achievements by challenging poor solutions, by formulating new proposals, by exerting pressure on the decision-makers and working on raising the awareness on all relevant issues.

4.2. PRIORITY POLICIES FOR ACCELERATING PROGRESS BY 2015

In order to accelerate progress towards those MDG targets that are lagging behind (and corresponding EU accession targets), a set of priority policies and measures is recommended and it includes:

- improving the social welfare system for the most vulnerable population groups (Roma and Egyptians, displaced persons and refugees, people with disabilities, the unemployed etc.), improving social inclusion and reducing discrimination;
- reducing the negative effects of child poverty and encouraging employment of youth and women;
- integration of the principles of fairness and sustainability as priority criteria for the allocation of resources from public sources;
- combating corruption and ensuring respect for the rule of law;
- improving cooperation and coordination, strengthening partnerships and the full involvement of societal stakeholders in the processes of developing and implementing policies;
- capacity building of the public administration, improving transparency and accountability for implementation of policies;
- improving statistics so as to enable better analysis of inequalities; improving health and environmental statistics;
- strong incentives for green economy undertakings (energy efficiency, sustainable renewable energy, agriculture and tourism) and creating new jobs in sustainable economic activities;
- incentives for developing the northern region, underdeveloped municipalities and rural areas;
- boosting economic competitiveness by increasing the level of knowledge and capabilities of the population, upgrad-

- ing infrastructure and using new, clean technologies;
- elimination or gradual ending of support for unsustainable economic activities;
- ensure greater representation of women in politics and in management positions;
- improve the accessibility and quality of education and health services:
- raise awareness of gender equality, tolerance and environment protection;
- reducing NCDs and their risk factors;
- improving sexual and reproductive health and rights, improving mental health;
- expansion of a representative system of protected areas (including improvements in protected areas management);
- improved natural resources management so as to ensure their sustainable use;
- more effective implementation of the environmental management instruments;
- integration of climate change in development policies;

Implementation of these policies and measures would generate multiple benefits within the country as well as in terms of fulfilment of EU accession requirements and other international obligations.

4.3. NEW PRIORITIES FOR THE POST2015 DEVELOPMENT AGENDA

The global debate suggests transforming the Millennium Development Goals to Sustainable Development Goals and keeping the key concepts while including other development challenges (such as widening inequalities, depletion of natural resources, the economic crisis and climate change). Sustainable and inclusive growth is at the core. National policies and strategies will increasingly integrate EU priorities – whose goals are increasingly binding for Montenegro – which thus represent the key driving force of the political, economic and social reforms. A key EU document is the Europe 2020 strategy for smart, sustainable and inclusive development.

Montenegro is well prepared to shape the post-2015 global development agenda. Through national consultations on the post-millennium development priorities, eight key issues that should serve as the foundation for the future development agenda were identified: 1) the economy, unemployment, income and equitable regional development; 2) combating crime, corruption and nepotism; 3) the health sector; 4) achieving equality; 5) preserving the environment; 6) developing infrastructure; 7) the education sector; and 8) strengthening the value system.

Although the issues that appear in the consultations on the post-2015 development agenda significantly match the existing priorities, the approach needs to be different. Montenearo will need an integrated, crosssectoral and multi-dimensional approach in order to avoid "working in silos". Montenearo also has to overcome weaknesses regarding disaggregated statistics; further improve the implementation capacities and the system of effective and transparent governance; work on quality aspects; as well as to find ways to overcome and alleviate the consequences of the budget constraints caused by the financial crisis. To keep up with global initiatives and EU priorities, the country will also need to include the following priorities in its development agenda: changes in the economic system aimed at overcoming the crisis in a sustainable manner, fairness and equality, children and youth, economic competitiveness, technological development and climate change.

In conclusion it can be said that there is a high level of overlap between the lessons learned in the implementation of the MDGs, EU policies, global consideration of the SDGs and national consultations. This gives a strong mandate to the decision-makers and administration (and all other stakeholders) to keep upgrading the strategic development framework in line with the new determinants, and what is even more important, to implement it consistently. New priorities cannot be completely separated from the policies necessary to accelerate achievement of the MDG targets. Therefore they are largely integrated in the recommendations of the priority policies and measures in section 4.2.

4.4. LINKS BETWEEN MDGs AND EU ACCESSION

The way in which the MDGs were adapted to the national situation made them complementary to many goals set in the EU accession process. Therefore the two processes – EU accession and MDG implementation – support one another strongly. Furthermore, since EU Member States significantly contribute to the wording of the SDGs, the future global goals will be consistent with EU priorities. This means that the requirements for EU accession and MDG/SDGs will continue to be consistent and complementary in the future.

Progress made towards achieving the MDGs will at the same time strongly contribute to integration and implementation of European policies, including the Europe 2020 strategy as an umbrella European development document. As Montenegro progresses in negotiations with the EU and meets the requirements set by relevant EU policies and laws, more favourable conditions will be put in place for achieving those MDG/SDG targets that are lagging behind. EU funds and mechanisms for programming will significantly contribute to the achievement of MDG/SDGs in the years to come, while EU monitoring mechanisms will support progress monitoring.

APPENDIX 1: OVERVIEW OF MDGS INDICATORS BY GOALS AND TARGETS

GOAL 1: REDUCE RELATIVE POVERTY AND OTHER POVERTY DIMENSIONS

Indicator	2004	2005	2006	2007	2008	2009	2010	2011	2012	Goal in 2015		
Target #1 – By 2015 reduce the proportion of the population living under the poverty line by 50%												
1. Poverty rate (%)		11.2	11.3	8.0	4.9	6.8	6.6	9.3		5.6		
2. Poverty gap (%)		2.1	1.9	1.4	0.9	1.4	1.1	2.0		0.9		
3. Severity of poverty (%)		0.7	0.6	0.4	0.3	0.5	0.3	0.7		0.3		
Targe	Target #2 – By 2015 reduce inequality in distribution of consumption											
4. Gini coefficient (%)		25.9	24.4	26.4	25.3	26.7	24.3	25.9		24.0		
5. Quintile ratio		3.7	3.7	4.0	3.8	4.0	3.7	4.1		3.6		
Targo	et #3 – Re Halve t	duce reg		•		•	•	;				
6. Poverty rate in the north (%)			17.8	14.0	8.9	13.2	10.3	17.5		8.9		
7. Poverty rate in rural areas (%)		16.5	17.6	12.0	8.9	14.8	11.3	18.4		8.2		
	Target #4 – Reduce unemployment to 9% by 2015											
8. Unemployment rate (%)	27.7	30.3	29.6	19.4	16.8	19.1	19.7	19.7	19.7	9.0		
8a. Unemployment rate, M (%)	23.6	26.2	29.1	18.1	15.9	18.0	18.9	19.5	19.3	9.0		
8b. Unemployment rate, F (%)	33.0	35.5	30.1	20.9	17.9	20.5	20.6	20.0	20.3	9.0		
9. Long-term unemployment rate (%)	25.9	24.4	14.2	13.3	15.6	15.5	15.6	15.5	15.6	7.0		

GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION

Indicator (%)	2003/04	2004/05	2005/06	2006/07	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	Goal in 2015
Target #1 - Achieve coverage by pre-school education of girls and boys at a level of 40% by 2015											
1. Enrolment rate	28.99	28.96	29.05	26.55	30.93	31.12	32.74	35.72	37.04		
1a. Boys	29.01	28.61	28.77	26.65	31.14	31.14	33.10	35.53	37.30		40.00
1b. Girls	28.96	29.34	29.34	26.65	30.71	28.23	32.35	35.94	36.75		
Targ	et #2 - A	chieve 10	0% cover	age with	elementa	ry educat	ion for bo	ys and gi	rls by 201	15	
2. Enrolment rate	92.27	93.93	96.51	98.58	99.72	99.25	98.25	97.97	98.29		100.00
2a. Boys	92.39	93.94	96.84	98.78	99.78	99.87	98.87	98.17	97.78		
2b. Girls	92.15	93.91	96.15	98.37	99.65	98.58	97.59	97.76	98.83		
3. Completion rate	92.25	93.23	96.51	97.49	99.05	98.78	97.89	99.62	99.18		
3a. Boys	92.47	93.2	96.72	97.79	99.28	99.11	98.57	96.85			
3b. Girls	92.02	93.25	96.29	97.18	98.81	98.43	97.16	97.1			
			Cer	ısus			Goal in				
Indicator (%)	19	91	20	03	2011		2015				
T	arget #3 -	- Reduce	the illiter	acy rate	of childre	n above tl	he age of	10 to 1%	by 2015		
4. Illiteracy rate	5.	90	2.	35	1.	50	1.00				

Due to certain differences in the methodology for collecting data, the data in the records of the Ministry of Education (**numbers in blue**) differ from the data collected by MONSTAT (in bold). These two institutions reached an agreement that MONSTAT will take over the data from the Ministry starting next year. The plan is to settle all comparisons and discrepancies by September 2013.

GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

Indicator (%)	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	Goal in 2015
Target# 1 – Economic empowerment of women													
1. Employment rate for women				28.8	27.6	28.7	34.8	36.1	34.4	33.8	33.7	34.6	50.0
2. Unemployment rate for women				33.0	35.5	30.1	20.9	17.9	20.4	20.7	20.0	20.3	9.0
	Target	#2 – Inc	rease th		ipation on a				ernmer/	t bodies	5		
3. Percentage of seats in the Parliament of Montenegro held by women	10.4	10.4	10.7	10.7	13.3	9.9	11.1	11.1	11.1	11.1	11.1	17.2	
4. Share of women in the ministerial positions in the Government	0.0	0.0	12.5	12.5	12.5	12.5	0.0	0.0	5.8	5.8	5.8	18.7	20.0
5. Share of women in the positions of mayors/presidents of municipalities	0.0	9.5	14.2	9.5	9.5	9.5	4.7	4.7	4.7	4.7	4.7	4.7	30.0
6. Share of women in the positions of councillors in the local assemblies	6.3	8.9	8.9	8.9	8.9	8.9	11.3	11.3	12.7	13.8	13.8	14.2	

GOAL 4: REDUCE CHILD MORTALITY

Indicator	2004	2005	2006	2007	2008	2009	2010	2011	2012	Goal in 2015	
Target #1 - Reduce the infant and under-five child mortality rates (per 1000 live births)											
Infant mortality rate (per 1000 live births)	7.8	9.5	11.0	7.4	7.5	5.7	6.7	4.4		7‰	
2. Mortality rate of children under 5 (per 1000 live births)	9.5	11.1	12.1	8.7	8.2	6.0	7.5	5.7		8‰	
	Target #2 – Immunization of all one-year-old children										
3. Ratio of one-year-old children immunized against measles (%)	91.7	90.3	91.8	91.6	89.5	85.9	90.0	90.7		95.0	
4. Ratio of children immunized ag	gainst BC0	G, DTP, O	PV and h	epatitis B	(%):						
4a. BCG	97.6	98.0	98.4	98.2	98.1	95.0	95.3	97.1		100.0	
4b. DTP	95.1	94.6	92.8	93.1	96.1	83.6	93.7	94.7		97.0	
4c. OPV	95.0	94.6	92.9	93.2	96.1	91.5	93.1	94.7		97.0	
4d. Hepatitis B	91.3	91.4	92.5	91.6	94.8	87.3	90.3	91.1		97.0	
Tai	get #3 –	Reduce 0	–4 infant	mortality	/ rate cau	ised by a	ccidents				
5. Number of accidents among children of age 0–4 that resulted in deaths (in the total population)	2	2	2	3	1	0				< 2	

GOAL 5: IMPROVE MATERNAL HEALTH

Indicator	2004	2005	2006	2007	2008	2009	2010	2011	2012	Goal in 2015	
Target #1 - Preserve and maintain reproductive maternal health											
Maternal mortality ratio per 100,000 live births	0.00	0.00	0.00	12.76	0.00	0.00				10	
Percentage of births attended by skilled health personnel (%)	99.6	99.9	100.0	100.0	100.0	100.0				100%	

GOAL 6: COMBAT HIV/AIDS, TUBERCULOSIS AND OTHER DISEASES

Indicator	2004	2005	2006	2007	2008	2009	2010	2011	2012	Goal in 2015	
Targe	et #1 – Ma	intain a l	ow HIV/A	IDS prev	alence ra	ate (0.01-	-0.02)				
1a. Rate of newly registered HIV cases per 100,000 inhabitants	0.15	1.07	0.61	0.92	0.92	1.24	1.24	1.13	0.97		
1b. Rate of newly registered HIV/AIDS cases per 100,000 inhabitants	0.30	1.37	1.07	1.38	1.38	2.16	2.16	1.45	2.10	<1	
2. Rate of voluntary HIV testing per 1,000 inhabitants		0.16	0.25	0.39	0.68	1.14	1.36	2.10	1.50	1	
	Tar	get #2 – F	Reduce T	B preval	ence by 2	2015					
3. Rate of newly registered tuberculosis cases per 100,000 inhabitants	26.7	27.4	27.3	24.5	20.7	19.6	19.0	19.1	15.8	< 20	
4. Percentage of people infected with multidrug resistant tuberculosis against total number of people infected with tuberculosis		1.77	3.48	4.32	4.40	3.33	3.44	3.36	3.06	< 1	
5. Mortality rate for tuberculosis per 100,000 inhabitants	0.97	0.32	1.28	1.12	1.43	1.26	0.80	1.61	0.96	< 0.5	
Target #3 – Reduce mort	ality rate	for chror	nic non-c	ommunio	cable disc	eases in	the age g	roup 0–6	4 years		
6. Mortality rate for cardiovascular diseases (per 100,000 inhabitants)	479.6	499.4	548.4	532.8	490.6	509.2				< 400	
7. Mortality rate for malignant tumour (per 100,000 inhabitants)	157.1	166.0	157.6	150.6	146.3	141.1				< 100	
Sources: Annual Report on HIV/AID:	C in Monte)= l=== F)l=::4" C:		wital fan F	2	D:	- D	:1	

Sources: Annual Report on HIV/AIDS in Montenegro; "Dr Jovan Bulajić" Special Hospital for Pulmonary Diseases, Brezovik; Public Health Institute

GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY

Indicator	1990	2000	2003	2005	2006	2007	2008	2009	2010	2011	2012		al in 5/20
Target #1 – Integrate principles of sustainable development into country policies and reverse the loss of environmental resources													
Proportion of the coverage of protected areas for the purpose of preserving biodiversity (%)	<u> </u>		7.14	7.14	7.14	7.14	7.14	9.04	9.04	9.04	9.04		10
Proportion of protected marine ecosystems in total coverage of protected areas for the purpose of preserving biodiversity (%)								0	0	0	0	3	
3. Proportion of land area covered by forests (forests and forest land) (%)				54.0		54.0			54.0	54.0	69.7		54.0
4. Number of exceedances identified during the measurement of concentrations of PM10 against limit values and alert threshold for the protection of human health in Podgorica*						75	86	45	41/1	89/27	79/18		< 35
5. Anthropogenic GHG emissions calculated against CO ₂ equivalent per capita [t CO ₂ eqv/capita]	7.7		7.2						6.5			2015 5.6	2020 5.7
6. a. Energy intensity (GIC/GDP)		904	674.8	558.2	487.9	377.5	315.3	282.9					262.2
Energy intensity (GIC/GDP) [ME data]		903.4	674.7	495.0	473.0	363.7	356.8	279.9	316.4				262.2
6. b. Proportion of renewable energy out of total consumption (% of renewable energy/ total energy consumption)	23.9	23.3	23.1	25.7	24.4	19.6	22.2	26.2					27.7
Proportion of renewable energy in total consumption (% of renewable energy/ total energy consumption) [ME data]		17.5	17.8	23.2	19.8	16.3	17.0	26.4	29.1				27.7
7. Degree of anthropogenic impact on the quality of surface waters (%)**		24.8			9.6	13.5	35.1	40.1	31.2	35.8	37.6	2015 15	2020 10
Target #2 – Halv	e the p	roportic	n of pe	ople wi	thout a	ccess t	o drinki	ing wate	er and s	anitatio	n		
8. Losses in the water supply network in urban settlements (%)				35-85	33-84	30-83	30-77	30-77	30-77	32 -72	57.0		30
9.Percentage of connections to the sewerage network in urban settlements				60.0	60.5	61.0	63.0	65.0	65.0	65.5	65.5	85	
10. Proportion of waste water that is treated out of total water quantity in accordance with national regulations (%)				10.0	11.0	15.0	17.0	18.0	18.0	18.0	18.0		60

^{*}The data for the period 2010–2012 has been updated, and the target value adjusted (numbers in blue) in the process of preparing this Report. For the figures provided from 2010 onwards, the first figure represents the number of times the limit value for PM10 (50µg/m³) has been exceeded, while the second one represents the number of times the tolerance limit (which is calculated as an allowed percentage increase over the limit value for a given period of time) has been exceeded. Montenegrin regulations (that came into force in 2010) prescribe a gradual lowering of the tolerance limit to 0% in 2015. The law allows the mean daily concentrations of PM10 to be above the limit and tolerance values 35 times a year, and the MDG target value for 2015 has been adjusted in accordance with this provision (the target is to keep the number of times the limit values and tolerance limits are exceeded below 35 times per year, i.e. that the measured PM10 concentrations form 2015 do not exceed 50µg/m³more than 35 times in a year).

^{**}Data for the period 2006–2012 has been updated (numbers in blue) in the process of preparing this Report. It was also clarified to what exactly the indicator refers (surface waters and surface water bodies).

APPENDIX 2:
COMPARATIVE OVERVIEW OF
GLOBAL AND NATIONAL GOALS,
TARGETS AND INDICATORS

Original Goals		Is and targets adapted to ational circumstances	Original indicators for	In	dicators adapted to national conditions	
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):	
		Goal 1: Eradicate	extreme poverty and hunger			
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day		1. By 2015 reduce the proportion of the population living under the poverty line by 50%	1.1 Proportion of population below \$1 per day (PPP- values)	Yes	1. Poverty rate (2005) 2. Poverty rate in the North (2006) 3. Poverty rate in rural areas (2005)	
	Yes	2. By 2015 reduce inequality in the distribution of consumption	1.2 Poverty gap	Yes	4. Poverty gap (2005) 5. Severity of poverty (2005)	
		Reduce regional discrepancies in (halve poverty in the north and in the rural areas)	1.3 Share of the poorest quintile in national consumption	Yes	6. Quintile ratio (2005) 7. Gini coefficient (2005)	
			1.4 Growth rate of GDP per person employed		Not used	
Target 1.B:	Yes		1.5 Employment-to-population ratio	Yes	8. Unemployment rates: total, for women and for men (2004) 9. Long-term unemployment rate (2004)	
and productive employment and decent jobs for all,		4. Reduce unemployment to 9% by 2015	1.6 Proportion of employed people living below \$1 (PPP) per day		Not used	
including women and the young			1.7 Proportion of own account and contributing family workers out of total employment	Not used		
			1.8 Prevalence of underweight children under five years of age	Not used		
Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	١	No similar target defined	1.9 Proportion of population below minimum level of dietary energy consumption		Not used	
		Goal 2: Achieve	universal primary education			
Target 2.A:		Achieve coverage with preschool education of girls	2.1 Net enrolment ratio in primary education		Enrolment rate in kindergartens: total, boys and girls (2003/04)	
Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full	Yes	and boys at a level of 40% by 2015 2. Achieve 100% coverage with elementary education by 2015	2.2 Proportion of pupils starting grade 1 who reach last grade of primary school	Yes	2. Enrolment rate in elementary school: total, boys and girls (2003/04) 3. Completion rate: total, boys and girls (2003/04)	
course of primary schooling		3. Reduce illiteracy rate of children above the age of 10 by 2015	2.3 Literacy rate of 15-24 year olds, women and men	Yes	4. Illiteracy rate in the population of persons above 10 (1991)	

Original Goals		ls and targets adapted to ational circumstances	Original indicators for	In	dicators adapted to national conditions
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):
		Goal 3: Promote gene	der equality and empower wom	nen	
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015		Economic empowerment of women	3.1 Ratios of girls to boys in primary, secondary and tertiary education	Not u	sed (except for goal 2 for primary education)
			3.2 Share of women in wage employment in the non-agricultural sector	Yes	Employment rate for women (2004) Unemployment rate for women (2004)
	Yes	2. Increase of the participation of women in elected government bodies on the national and local level	3.6 Proportion of seats held by women in national parliament	Yes	3. Percentage of seats in the Parliament held by women (2001) 4. Proportion of women in the Government (2001) 5. Proportion of women in the position of mayors (2001) 6) Proportion of women in the position of councillors in the local assemblies (2001)
		Goal 4: R	educe child mortality		
		Reduce the value of the indicator to 8 deceased	4.1 Under-five mortality rate	No	1. The same indicator is used (2004)
		infants per 1000 live births	4.2 Infant mortality rate	No	2. The same indicator is used (2004)
Target 4.A: Reduce by two thirds,	Yes	Immunization of all -year-old children	4.3 Proportion of 1-year-old children immunized against measles	No	3. The same indicator is used (2004)
between 1990 and 2015, the under- five mortality rate	103			Yes	4. Ratio of children immunized against: a) BCG; b) DTP; c) OPV and d)hepatitis B (2004)
		3. Reduce the accident death rates for children aged 0 - 4		Yes	5. Number of accidents among children of age 0–4 that resulted in deaths in the total population (2004)
		Goal 5: Im	prove maternal health		
Target 5.A: Reduce by three quarters,	\/	Preserve and improve	5.1 Maternal mortality ratio	No	1. The same indicator is used (2004)
between 1990 and 2015, the maternal mortality ratio	Yes	maternal reproductive health	5.2 Proportion of births attended by skilled health personnel	No	2. The same indicator is used (2004)

Original Goals		ls and targets adapted to ational circumstances	Original indicators for	Indicators adapted to national conditions		
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):	
			5.3 Contraceptive prevalence rate			
Target 5.B:			5.4 Adolescent birth rate			
Achieve universal access to reproductive health by 2015	No similar target defined		5.5. Antenatal care coverage (at least one visit and at least four visits)	None of these indicators is used		
			5.6 Unmet need for family planning			
		Goal 6: Combat HIV/A	AIDS, malaria and other disea	ses		
			6.1 HIV prevalence among population aged 15–24 years	Yes	1. Rate of newly registered HIV/AIDS cases per 100,000 population (2004) 2. Voluntary HIV testing rate per 1,000 inhabitants(2004)	
Target 6.A: Have halted by 2015 and	Yes	1. Maintain low HIV/AIDS prevalence rate (0.01–0.02)	6.2 Condom use during last high-risk sex	Not used		
begun to reverse the spread of HIV/ AIDS			6.3 Proportion of population aged 15–24 years with comprehensive correct knowledge of HIV/AIDS	Not used		
			6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10–14 years		Not used	
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/ AIDS for all those who need it	١	No similar target defined	6.5. Proportion of population with advanced HIV infection with access to antiretroviral drugs	Not used		

Original Goals		ls and targets adapted to ational circumstances	Original indicators for	In	dicators adapted to national conditions
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):
			6.6 Incidence and death rates associated with malaria		Not used
		Reduce mortality rate associated with chronic non-communicable	6.7 Proportion of children under 5 sleeping under insecticide-treated bed nets		Not used
Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases			6.8 Proportion of children under 5 with fever who are treated with appropriate antimalarial drugs		Not used
	Yes		6.9 Incidence, prevalence and death rates associated with tuberculosis		3. Rate of newly registered cases
			6.10 Proportion of tuberculosis cases detected and cured under directly observed short courseof treatment	Yes	per 100,000 inhabitants (2004) 4. Proportion of people infected with multidrug-resistant TB
				Yes	6. Mortality rate for cardiovascular diseases (per 100,000 inhabitants) (2004)
		diseases in the age group 0–64 years		Yes	7. Mortality rate for malignant tumour (2004)
		Objective 7: Ensur	e environmental sustainabili	ty	
			7.1 Proportion of land area covered by forest	No	3. The same indicator is used (2005)
			7.2 CO2 emissions, total, per capita and per \$1 GDP (PPP)	Yes	5. CO2 emissions per capita
			7.3 Consumption of ozone- depleting substances		Not used
Target 7.A:			7.4 Proportion of fish stocks within safe biological limits		Not used
Integrate principles of sustainable development in		Target is set in the same		Yes	Proportion of protected areas for the purpose of preserving biodiversity (2003)
national policies and programmes and halt the loss	No	way		Yes	2. Proportion of maritime ecosystems in total protected area coverage (2009)
of ecological resources				Yes	4. Number of exceedances of measured PM10 concentrations (2007)
				Yes	6.a Energy intensity (2000)
				Yes	6.b Proportion of renewable energy (1990)
				Yes	7. Degree of anthropogenic impact on the quality of surface water bodies (2000)

Original Goals		Is and targets adapted to ational circumstances	Original indicators for	In	dicators adapted to national conditions	
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):	
Target 7.B: Reduce biodiversity loss, achieving, by		target was not defined, ors related to biodiversity	7.5 Proportion of total water resources used	Not used		
2010, a significant reduction in the rate of loss	are mo	nitored within the scope of 1	7.6 Proportion of species threatened with extinction	Not used		
Target 7.C: Halve, by 2015,			7.7 Proportion of population using an improved drinking water source	Yes	8. Losses in water supply network in urban settlements (2005)	
the proportion of people without sustainable access to safe drinking water and basic sanitation	No	2. Target is set in the same way	7.8 Proportion of population using an improved sanitation facility	Yes	9. Percentage of connections to the sewer network in urban settlements (2005) 10. Proportion of waste water that is treated out of total water quantity in accordance with national regulations (2005)	
Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers	١	No similar target defined	7.9 Proportion of urban population living in slums.	Not used		
		Goal 8: Develop a glo	bal partnership for developn	nent		
Target 8.A: Develop further an open, rule- based, predictable, non-discriminatory trading and financial system. This includes a commitment to good governance, development and poverty reduction — both nationally and internationally.	1	No similar target defined	Some of the indicators from the list below are monitored separately for less developed countries (LDCs), Africa, landlocked developing countries and small island developing states Official Development Assistance (ODA) 8.1. Net ODA, in total and in the least developed countries, as the percentage of gross national income of OECD/DAC donor countries		Irrelevant	
Target 8.B: Address the special needs of the least developed countries. This includes:tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction		Irrelevant	8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation) 8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied 8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes 8.5 ODA received in small island developing States as a proportion of their gross national incomes		Irrelevant	

Original Goals		ils and targets adapted to ational circumstances	Original indicators for	ln	dicators adapted to national conditions	
and Targets	(Yes/ No)	If Yes, new goals and targets are (all adopted in 2010):	monitoring progress	(Yes/ No)	If yes, new indicators are (date of the beginning):	
Target 8.C: Address the special needs of landlocked developing countries and small island developing states (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty- second special session of the General Assembly)		Irrelevant	Market access 8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty 8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries 8.8 Agricultural support estimate for OECD countries as a percentage of their gross domestic product 8.9 Proportion of ODA provided to help build trade capacity		Irrelevant	
Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term		Irrelevant	Debt sustainability 8.10 Total number of countries that have reached their HIPC decision points and number that have reached their HIPC completion points (cumulative) 8.11 Debt relief committed under HIPC and MDRI Initiatives 8.12 Debt service as a percentage of exports of goods and services	Irrelevant		
Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries		Irrelevant	8.13 Proportion of population with access to affordable essential drugs on a sustainable basis	Irrelevant		
Target 8.F: In cooperation with the private sector,			8.14 Fixed telephone lines per 100 inhabitants	Yes	Fixed line penetration	
make available the benefits of new technologies,	1	No similar target defined	8.15 Mobile cellular subscriptions per 100 inhabitants	Yes	Mobile phone penetration	
especially information and communications			8.16 Internet users per 100 inhabitants	Yes	Internet penetration	

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Endnotes

- The network of coordinators for monitoring the implementation of MDGs and preparation of the annual reports was established in 2011 in the process of developing the First Annual Report and it now includes the representatives of the following ministries: Ministry of labour and social welfare; Ministry of education; Ministry of human and minority rights; Ministry of health; Ministry of sustainable development and tourism; Ministry of economy; Ministry of agriculture and rural development; Ministry of information society and telecommunication, and Ministry of foreign affairs and European integration. Representatives of the Statistics Office (Monstat) and the Public Health Institute are also included in the network of the MDG coordinators.
- In addition to the coordinating institutions, other public institutions were consulted in the process of collection of data and development of the Report. These include institutions like the Environment Protection Agency, the Hydrometeorology and Seismology Institute and some specialized hospitals. The following civil society organizations also contributed to the process of developing the Report: Centre for Education and Training, NGO Parents, private pre-school institutions Kockica and Artić Pinokio, Association of the Young with Handicaps, Association of Businesswomen, Anima, SOS Centre for Women and Children Victims of Violence Podgorica, Centre for Development of Non-Governmental Organizations, Foundation Prona, Expeditio etc.
- 3 United Nations Development Group, *Guidance* Note: 2013 Addendum to the MDG Country Report Guidelines, May 2013
- The Second Annual Report identified significant lagging behind the target values within the MDGs 1, 3 and 7 (poverty reduction, gender equality, environment sustainability), as well as for the targets 1 and 2 (for some groups) within the goal 2 (education) and target 3 within goal 6 (combating HIV/AIDS and other diseases).
- According to the World Bank classification, this is the group of countries with a Gross National Income per capita between US\$4,086 and US\$12,615 (GNI according to the Atlas methodology of the World Bank). In 2012, Montenegrin GNI (according to the Atlas methodology) amounted to US\$ 6,940.
- 6 Data from the Central Bank of Montenegro and MONSTAT.
- 7 HDI is a complex measurement of development derived from life expectancy, education and incomes. It was introduced as an alternative to the conventional measurements of development like level of income or economic growth rate. Data taken from http://hdrstats.undp.org/en/countries/profiles/MNE.html

- Assessments from the last European Commission Report on the Progress of Montenegro in the Accession Process (EC, SWD(2012) 331, *Montenegro 2012 Progress Report*)
- 9 Communication from the Commission to the European Parliament and the Council, COM(2012) 600 final, *Enlargement Strategy and Main Challenges 2012-2013*
- 10 Communication from the Commission, COM(2010) 2020 final, *Europe 2020: A Strategy for Smart, Sustainable and Inclusive Growth*.
- Strategy Europe 2020 defines seven leading initiatives. Some of them are: new abilities and jobs, the young, combating poverty and efficient use of resources.
- 12 In Montenegro poverty is measured on the basis of the national poverty line (which includes the costs of food and the basic costs not related to food), while in Europe there is the standard according to which all the persons with income lower than 60% of the average income are considered to be at risk of poverty. Social exclusion is defined in the EU as a multi-dimensional phenomenon which includes poverty based on income, unemployment, access to information, child care and health services, housing conditions and participation in social processes. MDG 1 in Montenegro projected the reduction in the number of the poor by 50% over a period of ten years, while the European goal is to reduce the number of the poor by at least 20 million out of the population of 117.52 million of the poor who lived in the EU in 2010. The national goal is more ambitious in quantity, while the European goal is more comprehensive – it refers to a broader range of issues related to poverty and to the broader population category.
- 13 The data for MDG indicators by year for this and other goals are presented in the tables in Appendix 1:Overview of MDG Indicators by Goals and Targets, and they serve as the basis for the analysis of trends and inequalities. Since 2006, the poverty line and other poverty indicators (rate and measurements of inequality) have been determined by MONSTAT on the basis of the Household Consumption Survey (before 2006 there were some surveys supported by the World Bank). The absolute poverty line is calculated in line with the key parts of the World Bank methodology: it is determined in a monetary amount (for one month) per adult equivalent and it includes the costs of basic needs (food and basic non-food products). The absolute poverty line that MONSTAT uses for the analysis of poverty is the national specific line and it cannot be used for international comparisons but only for monitoring the situation and changes in poverty in Montenegro.
- The poverty rate was 9.3% in 2011 (the target for 2015 is 5.6%), the poverty gap was 2% (the target is 0.9%) and the severity of poverty was 0.7% (the target is 0.3%).

The poverty gap is calculated as the product of the poverty rate and the average deviation of the consumption of the poor from the poverty line, while the severity of poverty is measured as a relative deviation of the consumption of the poor from the poverty line, taking into account inequalities among the poor.

- 15 The source of data on unemployment is the Labour Force Survey conducted by MONSTAT.
- For the presentation of unemployment by municipalities in Figure 2-3,results of the 2011 Census were used, since the results of the Labour Force Survey are not available at the sub-regional level. The methodology for calculation and the questions on the basis of which the data on unemployment were obtained in the Labour Force Survey and in the Census are not different, but the observed time periods are. Data on unemployment from the 2011 Census refer only to the week before the Census (April 2011), while for the Labour Force Survey data are obtained quarterly and annually. Therefore, there is a certain mismatch in data –the unemployment rate was 24.5% in the Census, while it was 21.2% in the first quarter of 2011 according to the Labour Force Survey.
- 17 Regular economic report for South-East Europe of the SEE 6 countries, World Bank, 2013
- 18 UNDP National Human Development Report for 2009 (and the original research which it was based on) referred to Roma, Ashkali and Egyptians. Newer data (including the Census data) show that only members of Roma and Egyptian communities live in Montenegro now.
- 19 The research was carried out 7 15 June 2013 within the project *Support to Social Protection of Roma and Egyptian Population,* and it covered respondents from Podgorica, Berane and Nikšić. Source, newspaper report, Daily Vijesti.
- The Report on the Situation in the Field of Reform of Judiciary and Human Rights (Chapter 23) in Montenegro in the period from 10 October 2012 to 10 April 2013, Coalition for Monitoring Negotiations with EU for the Chapter
- 21 Proposal of the Strategy for Development of the System of Social and Child Care in Montenegro 2013-2017
- 22 UNICEF the Transformative Monitoring for Enhanced Equity (TransMonEE) database stores a wide range of data important for the position of children, the young and women in the Central and East European countries and Commonwealth of Independent States (CEE/CIS).
- For example, European Commission Progress Reports for 2011 and 2012 underline the necessity of employment and promotion on the basis of abilities, particularly in public administration, judiciary and prosecution.

The State Department Report on the situation of human rights in Montenegro for 2012 states "Deficiencies in the implementation of the rule of law, including the absence of absolutely independent institutions, encouraged... nepotism...".

- 24 Communication from the Commission, COM(2013) 92 final, A decent life for all: Ending poverty and giving the world a sustainable future
- 25 Commission Recommendation C(2013) 778 final, Investing in children: Breaking the cycle of disadvantage
- 26 Communication from the Commission, COM(2008) 865 final, An updated strategic framework for European cooperation in education and training
- 27 Early and Pre-school Education Strategy (2010-2015)
- Ministry of Education uses the term "children with special education needs" to mean: 1) children with disabilities (children with physical, intellectual, sensory and combined disabilities); and 2) children with difficulties and disadvantages (children with behavioural disorders, serious long-lasting illnesses, learning difficulties and other difficulties caused by emotional, social, language and cultural obstacles). (Article 4, Law on Education and upbringing of children with special educational needs, Official Gazette, nr 45/10)
- 29 As assessed in the Strategy for Early and Preschool Education (2010-2015).
- 30 According to the 2013 National Human Development Report, the last data about the achievements of Montenegrin pupils in the Programme for International Students Assessment (PISA) showed certain progress in comparison to the results from 2006 in languages and mathematics, but the results in the field of science were not satisfactory. Results of the PISA in 2009 showed that 53% of Montenegrin fifteen-year olds are functionally illiterate.

31 MONSTAT, 2009

- The Report on the Situation in the Field of Reform of Judiciary and Human Rights (Chapter 23) in Montenegro in the period from 10 October 2012 to 10 April 2013, Coalition for Monitoring Negotiations with EU for the Chapter 23
- Including the Human Rights Action, Association of Parents ME, Union of Employers, etc. Concerns were also expressed by 7,000 citizens that signed the petition against the adoption of this law.
- The Law on the Election of Councillors and MPs, for example, should be revised so that the provision on the 30% of women is really applied in practice, i.e. that

it is ensured that every third candidate on the list of candidates is a person belonging to the less-represented gender and that the seats are allocated according to the order of the candidates on the list.

- The survey by the marketing agency Ipsos on the perception of men and women in high positions in the state showed that women, although less than men, think that men would be more successful in high state positions (like president of the state, prime minister, speaker of the parliament, minister, mayor, director of a public company etc.). Only women thought that women would be better in such positions, however, in a small number of them—deputy minister, prosecutor and judge, while men thought that men would be more successful in these positions too.
- 36 Screening Report for Chapter 23 from December 2012.
- In the process of adaptation to country conditions, the target value of 95% was established for the vaccine against measles, 100% for BCG, 97% for DTP, OPV and hepatitis B. The World Health Organization now recommends that the target value for the rate of vaccinated children for BCG should be reduced from 100% to 98%, while for the vaccines against DTP. OPV and hepatitis B it should be reduced from 97% to 95%.
- 38 The European health policy framework aims to support action across government and society to "significantly improve the health and well-being of populations, reduce health inequalities, strengthen public health and ensure people-centred health systems that are universal, equitable, sustainable and of high quality". (Health 2020)
- 39 In the process of preparation of the *Second Annual Report* the indicator of HIV/AIDS prevalence was added with the same target value (less than one case per population of 100,000).
- 40 EC, COM(2007) 630 final, *Together for Health:* A Strategic Approach for the EU 2008–2013.
- 41 National Population Health Survey for Montenegro from 2008, Public Health Institute of Montenegro, Podgorica, 2013
- One of the challenges identified in the First Report (2011) was related to difficulties in monitoring energy intensity due to the lack of reliable and complete data from energy balances. Since the project aimed towards harmonizing national methodology in energy statistics with the practice of EUROSTAT was implemented in 2011–2012, it may be expected that the improved data on energy intensity in the previous period (including estimates for the following years) will be available soon.

- Preparations for the designation of the first protected area in the sea are in their final stages (feasibility study for the location Katič between Petrovac and Sutomore has been prepared).
- Limit value, i.e. the value allowed for PM10, is $50\mu g/m^3$ (mean daily value). The tolerance threshold is an allowed percentage of increase in the limit value within the set timeframe. With a tolerance threshold of, for instance 100%, concentrations of PM10 up to $100\mu g/m^3$ are acceptable. Montenegrin regulations set out a gradual decrease in the tolerance threshold down to 0% in 2015. It means that from then on every concentration of PM10 which is above the daily value of $50\mu g/m^3$ will be considered an exceedance (while up to 35 exceedances per year are acceptable).
- In the table in Appendix 1, data from the First National Report of Montenegro on Climate Change from 2010 was used. The Environment Protection Agency updated the data and prepared annual GHG inventories for the period 1990–2011. This data is currently being checked and re-calculated through the process of development of the Second National Report on Climate Change. The Report will be finished and submitted to the UN Framework Convention for Climate Change (UNFCCC) by June 2014 at the latest. The updated GHG inventories will then become available as official documents.
- 46 Ministry of the Economy, draft *Energy Development Strategy by 2030 (Green Book and draft White Book)*, 2012
- 47 The representative parameters of water quality: oxygen saturation; biochemical oxygen demand; content of orthophosphates, content of nitrates; content of total evaporated phenols and the number of faecal bacteria in 1 ml of water.
- 48 It is realistic to expect that by that time the plants in Žabljak, Nikšić, Budva and Herceg Novi will start operating.
- 49 MDG indicators are in line with the goals and indicators of several relevant strategies and action plans, including the National Sustainable Development Strategy, The First National Report on Climate Change, masterplans for water supply and waste water and others.
- As already noted in section 2.7.1, GHG emissions in the twenty-year period (1990–2010) have been reduced from 7.7 to 6.5 t $\rm CO_2$ equivalent per capita, while energy intensity has been reduced by about 21% in the period 2000–2010.
- 51 Ministry of Foreign Affairs and European Integration, *Thirty First Quarterly Report on the Overall Activities within the Process of Stabilization and Association EU*,

January - March 2013, Podgorica, April 2013.

- The ICT survey conducted in accordance with EUROSTAT methodology included individuals between 16 and 74 years of age.
- World Economic Forum, *The Global Competitive*ness Report 2012–2013
- The sources of these assessments are *The First National Communication of Montenegro to UNFCCC* (2010), the study *The economic impacts of climate change in Montenegro: A first look (2010)* and *Technology needs assessment for mitigation of climate change and adjustment for Montenegro: National strategy and action plan* (2012)
- Such as Europe 2020, Strategic Framework for European cooperation in education and training (ET 2020), European health policy Health 2020, the communication A Decent Life for All: Ending poverty and giving the world a sustainable future, the recommendation Investing in children: Breaking the cycle of disadvantage etc.
- 56 SEC(2010) 1564 FIN The European Platform against Poverty and Social Exclusion: A European framework for social and territorial cohesion
- 57 Council of the European Union, *The Overarching Post 2015 Agenda Council Conclusions*, 2013
- Komar, Gegaj, Report on National Consultations on the Post-Millennium Goals, The Montenegro I Want, UNDP, 2013 (Komar, Gegaj, Izvještaj o nacionalnim konsultacijama o postmilenijumskim ciljevima, Crna Gora kakvu želim, UNDP, 2013).
- According to the UNDG guidelines, the level of national support encapsulates overall efforts (dedication, implemented policies, programmes and projects, and allocated funds) of all stakeholders intended for meeting the set targets. The assessments in the table are given on the basis of the analysis presented in chapters 2.1-2.8 of this Report.

