

**THE REVIEW
OF THE IMPLEMENTATION
THE MILLENNIUM DEVELOPMENT GOALS IN SERBIA**

INTRODUCTION

At the Millennium Summit held in New York in September 2000, the leaders of 189 United Nations Member States adopted the United Nations Millennium Declaration that proclaims the fundamental values on the basis of which international relations should be rested in the twenty-first century: freedom, equality, solidarity, tolerance, respect for nature and shared responsibility.

The Millennium Development Goals (hereinafter MDGs) derive from that Declaration. In his Report entitled "Guidelines for the Implementation of the United Nations Millennium Declaration", the United Nations Secretary-General promoted the MDGs alongside the targets and indicators expected to be achieved by 2015. The MDGs aim to:

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, tuberculosis and other diseases
7. Ensure environmental sustainability
8. Develop a global partnership for development

The European Commission Report on Millennium Development Goals 2000-2004 in the EU region emphasizes the tools of development policy designed to reduce poverty. In that context, six pivotal areas are set forth at which the activities are to be directed: trade and development, regional integration and cooperation, support to macroeconomic policies and improvement of equal access to social services, transport, healthy food and sustainable rural development and the building of institution capacities. Also, it is said in the Report that three crosscutting topics will have special significance in all sectors and in all EU countries: human rights, the environment, and gender equality.

The Millennium Declaration calls on underdeveloped and developing countries encountering the poverty problem and exclusion of vulnerable groups, i.e. regions, to adopt and implement national development strategies in order to achieve the MDGs. Preparation and the publication of MDG documents will help develop and focus the public debate on the specific development priorities at national and regional levels.

Due to the shortage of time in the discussion conducted in the process of the preparation of documents on the achievement of the MDGs in Serbia, agreement has been achieved to prepare a Review at this stage and to work out a Report at the following.

The Review of Millennium Development Goals at the national level in Serbia is aimed at providing public information about these problems for the purpose of social mobilization of key factors in the implementation of these goals. The Review is also a means of raising awareness of the problem, public presentation, building of partnership, strengthening of political responsibility and the building of national capacities for monitoring and reporting the progress in the implementation of the MDGs. The Review is aimed at:

- Aligning the global millennium obligation with local needs,
- Linking global goals with national priorities,
- Empowering the broad political public in order to achieve the MDGs faster,
- Creating public consensus in respect of development challenges we are faced with,
- Building alliances between government, civil society, private sector, international institutions and other partners in development, both at national and local levels.

All information in this Review concerns the Republic of Serbia, excluding Kosovo and Metohija, for 1990-2003. The period covered by this Review is very specific. The 1990s in Serbia were characterized by dramatic changes: from the disintegration of the state followed by the civil war in the territory of the former SFR of Yugoslavia, over a grave economic crisis and hyperinflation, to the NATO bombing in 1999. Due to the specificities of the decade in Serbia, the Report provides a background analysis and considers the events that took place after 2000 when the country embarked upon extensive reforms in all spheres of society. The following material has been used in the preparation of the Review: official documents, the strategies prepared or adopted in relevant Ministries, databases, analyses, projects, research results, expert experiences and assessments of various problems, as well as personal experiences in relevant areas. In addition to indicators designed to monitor the

MDGs implementation, additional indicators relevant for, and typical of, the situation in Serbia have been used in the Report.

This Review is intended for the public, decision-makers and partners rendering support to the Millennium Development.

During the preparation of the Review, spearheaded by the Working Group of the Government of the Republic of Serbia, extensive consultations have been held with relevant persons and institutions, both governmental and non-governmental.

The first draft of document has been made with the assistance of the United Nations, aimed at devising a coherent national development strategy in Serbia which will address the true priorities of the country.

1. Assessment of socio-economic development conditions in the 1990s.

Transition process in Serbia started as early as 1989-1990 with the adoption of the Programme of Economic Reforms by the then Government of the SFR of Yugoslavia. Numerous laws were adopted and amended which signified a departure from the then self-management socialist system. However, the then Serbian leadership paid but a lip service to that process. Disagreements among top political leaders about the transition programme that was the basis for the achievement of economic efficiency as a pre-condition for the development of the social sphere, respect of human rights and the building of democratic relations in society accounted for the disintegration of the SFR of Yugoslavia. The disintegration of the former state did not happen peacefully. Civil wars broke up in the Republics that opted for independence. In 1992, the Republic of Serbia and the Republic of Montenegro decided to establish a new state – the FR of Yugoslavia.

Transition process was stalled in the new state of the FR of Yugoslavia. In the middle of 1992, the international community imposed economic sanctions on the FR of Yugoslavia. Wars in neighbouring republics set off waves of Serbian refugees who ended up in Serbia (between 700,000 and 800,000 persons). Hyperinflation, which began in February 1992, took a gradual turn upwards and peaked in January 1994 when only in that month it amounted to 313,563,558 per cent¹. It led to the collapse of the monetary system. Companies were left without working capital and citizens without their dinar-savings. Citizens' foreign currency savings, guaranteed by the state, were frozen as early as the first half of 1991². In 1994, the GDP in Serbia excluding Kosovo and Metohija was halved compared with that of 1990 (converted in US dollars at market prices according to the World Bank methodology, the GDP fell by about 49.7 per cent³).

In the 1994-1998 period, the GDP increased very slowly (by 8.7 per cent in the entire period, i.e. at an average annual rate of somewhat less than 1.4 per cent, also calculated according to the afore-mentioned methodology). As a consequence of the bombing of the country in 1999, the GDP was reduced by 34.3 per cent compared with the preceding year and in 2000 it fell by another 16.8 per cent. Compared with 1990, the GDP was reduced by 70.0 per cent in 2000.

During the 1990s, the share of agriculture, as against industry and services, in the structure of the GDP significantly increased. The share of subsistence consumption rose in the structure of the personal income of the population. The average salary in 2000 amounted to EURO 95⁴, less by 83 per cent from that in 1990. Overall unemployment was in the ascendant and, from 16.7 per cent in 1990, the unemployment rate rose to 25.6 per cent in 2000. A 24-month delay was registered in the payment of social benefits (including children's allowances). The economic and social rights were dramatically threatened in the last decade of the past century, while the level of their exercise was remarkably low⁵.

¹ Monthly survey of economic statistics, "Index" No. 2/1994, Federal Statistical Office, Belgrade.

² Up until the democratic changes of 2000, the citizens of Serbia could not use their foreign currency savings. A Law on the repayment of the debt was adopted in the wake of the changes which accounted, among others, for the restoration of bank confidence.

³ "Report on Transition in Serbia and Montenegro", G17 Institute, Belgrade, 2004, p. 92.

⁴ The average net salary converted in DEM at the market conversion rate, and then converted into Euros according to the 2:1 ratio officially fixed by the Central Bank.

⁵ See: "Exercise of Economic and Social Rights", Collection of Works, Belgrade Centre for Human Rights, 1999, Belgrade.

Bearing in mind the economic enfeeblement of the state, the funding of the programmes for the protection of the environment was inadequate. Accordingly, out of the projected 0.1 - 0.3 per cent of the GSP of the FR of Yugoslavia⁶, only about 0.001 per cent of the GSP was allocated in the 1998-2000 period. Less than 0.02 per cent of the GDP⁷ was allocated at the level of the Republic of Serbia in the same period, which had a negative effect on the environment management.

2. Assessment of the implementation of reforms in the 2001-2004 period

The process of transition to the market economy and the building of appropriate institutions and democratic relations in society resumed in Serbia at the end of 2000. In the beginning, the emphasis of the reforms was placed on price and foreign trade liberalization, along with macroeconomic reforms, designed to achieve stabilization. The effect of the price liberalization is reflected in the decrease of the GDP share, influenced by controlled prices, from 20 per cent in 2000 to 14 per cent in 2002⁸. The prices were gradually liberalized in energy and utilities sectors, aimed at achieving service profitability. The goods supply was helped by the liberalization of foreign trade. However, notwithstanding a dynamic growth, the low level of export accounted for the increase of the foreign trade deficit. The foreign exchange reserves, though, cover about the six-month import of goods and services, so that there exists no threat of debt crisis for now.

The reforms in the monetary sphere, in the banking sector and in public finances resulted in the reduction of the annual inflation rate from 91.8 per cent in 2001 to 10.1 per cent in 2004. The dinar is exchanged on the domestic currency market, providing for the elimination of the coverage of quasi-fiscal deficits. The fiscal system has become efficient and transparent. New laws on reducing tax rates were adopted, as well as the Value Added Tax Law, in force since January 2005. Compared with the same period in 2004, the deficit in the budget of the Republic was almost halved in the last three months of 2005 (it was reduced by 40.8 per cent), indicating that the implementation of the new tax laws adopted in 2004 has yielded very good results.

The macroeconomic stabilization, along with legal amendments, primarily in the tax system, brought about a marked improvement of the investment climate in the country. The share of foreign investments in the GDP increased from 9.3 per cent in 2001 to 15.8 per cent in 2004. The share of foreign direct investments in the GDP increased from 1.5 per cent in 2001 to 3.7 per cent in 2004. This accounted for a continued increase of the rate of the economic growth. Compared with 2000, the GDP in 2004 increased 2.4 times. The fall in employment was arrested and the registered unemployment rate was slightly reduced (by 0.6 per cent in 2004 compared with the preceding year)⁹. The share of the foreign debt in the GDP was substantially reduced, from 117.6 per cent in 2000 to 34.6 per cent in 2004.

However, corporate and public sector reforms are delayed wherefore it is necessary to intensify them.

The Poverty Reduction Strategy was adopted at the end of 2003, while strategies in the key segments important for MDG implementation have been prepared and are ready for adoption (Annex 2). The Poverty Reduction Strategy is fully in line with MDGs and its implementation is being reviewed also through the MDGs.

⁶ "The Resolution on the Policy of the Protection of the Environment in the Federal Republic of Yugoslavia", Official Gazette of the FRY 31/93.

⁷ "The Overview of the Situation in the Environment in Serbia in 2002", UNECE, Translation, Belgrade, 2002 and "The Overview of the Sector of the Environment in Serbia and Montenegro", World Bank Translation, Belgrade, 2003.

⁸ "Report on Transition in Serbia and Montenegro", G17 Institute, Belgrade, 2004.

⁹ G17 Bulletin, G17 Institute, Belgrade, February 2005.

PART ONE

MILLENNIUM DEVELOPMENT GOALS AND STRATEGIC DOCUMENTS

1. Sustainable economic growth

Transition to open market economy is necessary to achieve economic efficiency in development and ensure sustainable economic growth. Social ownership protected by barriers from free competition proved very inefficient, accounted for numerous development disparities and became a large obstacle to sustainable economic growth, which necessitates urgent restructuring and privatization of socially-owned enterprises. It is also necessary to intensify the process of restructuring public enterprises and the entire public sector.

It is assessed that Serbia will have to achieve relatively high rates of real GDP growth in the years to come, at least 5 per cent per year on average. This is a precondition for reducing the lagging-behind in the level of economic development, primarily in respect of the countries of the European Union, for addressing numerous economic and social problems in the country and for implementing the MDGs by 2015 at a satisfactory pace.

The basic pre-requisites for the achievement of sustainable economic growth are:

- Provision of a considerably larger scope of investments,
- Creation of new economic structures with competitive production and service programmes and cooperation between Serbian and foreign companies on a partnership basis,
- Raising quality of work and increasing productivity,
- Introduction of new technologies, especially information technology,
- Greater investment in scientific research, especially in research for practical application,
- Sustainable management of natural resources
- Greater investment in human resource development.

It is necessary to establish mechanisms in the process of the implementation of economic and social reforms in Serbia as would ensure human dimension of the reforms. This would also ensure that confidence be restored in democratic governance. Greater economic and social inter-linkage would bolster the feeling of security among people. The struggle against poverty and the implementation of the strategy of social inclusion, aimed at ensuring equal access of all citizens to jobs and health and education institutions, are imperative for achieving humane development in this millennium.

2. Increasing job opportunities

Proceeding from the Millennium Declaration and taking into account the situation regarding poverty in the country, Serbia adopted the Poverty Reduction Strategy in mid-2003. The concept of the implementation of the Strategy is based on sustainable and dynamic economic growth. This requires a substantial increase in investment, creation of new jobs and an increase of overall employment. This all the more so as research has shown¹⁰ that poverty in Serbia is contingent, in relatively large measure, upon high unemployment. The projected poverty reduction measures are aimed at ensuring higher employment, especially of vulnerable groups. In that context, activities have been planned as would increase the level of the quality of labour supply, both through re-training chronically unemployed and underskilled workers and through fully including children, especially from the vulnerable groups of population, into the system of formal education, as well as through improving the programmes in the field of vocational education.

The National Employment Strategy for 2005-2010 has been adopted. It defines the direction and activities to be undertaken in the forthcoming period, aimed at creating an efficient labour market and at addressing unemployment problems successfully. The Strategy incorporates ten action guidelines of the European Commission in the area of employment:

- Active and preventive measures for unemployed and the inactive
- Encouragement of job creation and entrepreneurship,

¹⁰ A survey of population living standard measurement for 2002, Ministry of Social Affairs of the Republic of Serbia.

- Address change, and promote adaptability and mobility in the labour market,
- Promote development of human capital and lifelong learning
- Increase labour supply and promote active ageing,
- Strengthen gender equality,
- Promote the labour market integration of people at a disadvantage,
- Make work pay through incentives to increase work attractiveness,
- Transform undeclared work into regular employment,
- Address regional employment disparities.

Considering the specific problems and needs of the Serbian labour market, two other priorities have been added to the Strategy:

- Encourage direct foreign investment and activate domestic savings to maintain and create jobs, and
- Reduce regional employment disparities.

A National Employment Plan of Action is under preparation; its implementation will ensure the operationalization of the National Employment Strategy. The activities and measures to be taken within the Plan emphasize the problem of youth unemployment, long-term unemployment and the reform of labour market institutions, particularly of the National Employment Bureau.

3. Local development and the decentralization of the system of the management and financing of social services

Serbia falls within the group of the European countries with the largest regional disparities in the level of development¹¹. It is thus necessary to strengthen the role of local communities in mobilizing local resources and creating a favourable environment that will motivate entrepreneurs to invest in underdeveloped and less developed regions. Local communities might take measures such as: adoption of municipal development plans, encouragement of SMEs development, economical space and resource management, construction and maintenance of infrastructure, provision of access to social services, especially for the most vulnerable families and individuals.

An efficient and sustainable economic growth, as the basis for achieving MDGs, implies therefore a considerably higher efficiency in development at the local level, too. Of particular importance in that respect is the attainment of efficiency and quality in the field of social services at the local level (education, health, culture, social welfare, etc), as well as in the domain of environmental protection. Decentralization is therefore a very important process which, already commenced in some activities in Serbia, should be intensified. It is necessary to complete the decentralization of the system of the management of the development of social services, in particular the decentralization of the system of their financing.

To realize this process, it is necessary to ensure that relevant activities take place at national and local levels simultaneously. Social consensus and the adoption of appropriate regulations are needed at the national level, while it will be necessary to devise strategic development plans, based on territorial partnerships among stakeholders (such as exist in many regions in developed EU countries), i.e. representatives of local government, employers, labour market, trade unions, education institutions and/or the non-governmental sector¹², at the local level. Local government should strive to improve and develop local infrastructure, establish real estate and infrastructure cadastres, provide quality drinking water and better sanitation conditions and protect the environment.

An important role in the process of ensuring a quality and sustainable development at the local level is played by the local office network of the Agency for SMEs Development, designed to support the establishment and development of private SMEs, pillars of development, and provide advice to entrepreneurs and SMEs.

Finally, the decentralization of the financing of social services implies citizen's inclusion in the process of decision-making at the local level concerning the expenditures that, ultimately, they are expected to defray. An

¹¹ Poverty Reduction Strategy in Serbia – Challenges and Possibilities at the Local Level, Standing Conference of Towns and Municipalities

¹² The role of the non-governmental sector in the implementation of the Poverty Reduction Strategy within the established priority targets has been elaborated in greater detail in the publication titled “The Poverty Reduction Strategy in Serbia”, Consultative Committee of Civil Society, February 2005.

effective management of decentralized public finances requires the establishment of an efficient IT system, nationally and locally.

4. Reform of the education system

Important democratic principles, in line with MDGs, such as compulsory, free, primary schooling for all irrespective of sex, race, national, religious, linguistic, social, cultural and regional belonging or physical and psychological constitution have been incorporated in the education system of the Republic of Serbia. A developed and geographically well distributed network of schools (particularly in less developed and sparsely populated regions) and the availability of qualified teachers provide the preconditions for the realization of the right to education.

The amendments to the Law on Basic Upbringing and Education were adopted in June 2004, providing for the measures designed to ensure a stable long-term development in the education sector. One of those measures was the establishment of the National Board of Education¹³. In the meantime, i.e. prior to the election of members the National Board of Education, documents of great importance for the education sector have been prepared, some of which have also been adopted. They include the *National Plan of Actions for Children, Poverty Reduction Strategy, National Plan of Actions for Roma Children, Secondary Education Reform Strategy, Consolidated Plan of Actions for the Advancement of Roma Education in Serbia and the Adult Education Strategy*.

To achieve the MDGs in the field of education within the next decade, it is necessary to take steps projected in the strategic documents, as well as in the MDGs Review, while special attention is devoted to vulnerable groups (children with special needs, children in rural areas and Roma children).

5. Reform of the health system

Bearing in mind the ongoing changes within the reforms of the system of health protection, important steps have been made in the definition of strategic documents. Particularly important is the proposed strategy "Better Health for All in the Third Millennium" (It includes the Health Policy of Serbia, Draft Vision of the System of Health Protection and the Reform Strategy and Action Plan). All MDGs are included in the basis of these documents. A public discussion of the Draft Law on Health Protection is under way which is expected to be the basic instrument for the implementation of the changes after its adoption. It is important to point out that *The National Strategy to Combat HIV/AIDS in Serbia until 2010* and *the Programme of the Protection of the Population against Tuberculosis*, linked directly to the MDGs in the field of health, were adopted at the beginning of 2005. It is expected that these documents, along with those that are under preparation (such as *The Strategy to Fight Smoking*), will intensify activities, aimed at enhancing the health of the population, especially of the vulnerable groups, and ensure an effective monitoring of the progress made in the achievement of the proclaimed goals.

6. Environmental protection and development

Proceeding from the recommendation of the Rio Conference¹⁴, the FR of Yugoslavia adopted as early as 1993 the following strategic documents: The Resolution on the Protection of the Environment in the FRY¹⁵ and the Resolution on the Policy for Maintaining Biodiversity in the FRY¹⁶. By adopting these Resolutions, the FR of Yugoslavia adopted already at that time the concept of sustainable development. However, due to the reasons already quoted in the Review, not much was done in the implementation of the documents until 2001 and the beginning of the process of reform and transition.

The political changes in Serbia and the lifting of international sanctions ushered in new activities. Accordingly, a new *National Strategy of Waste Management* was adopted and a Council for Sustainable Development was established in 2003. In line with the practice and recommendations of the international

¹³ The Board, among others, "establishes directions of the development and improvement of pre-school, primary and secondary education; follows and analyzes the situation in education at all levels of its competence and the alignment of the education system with European standards." Amendments to the Law on Basic Upbringing and Education, Competence of the Board, Article 12.

¹⁴ United Nations Conference on the Environment and Development, Rio de Janeiro, 1992

¹⁵ Official Gazette of the FRY 31/93

¹⁶ Official Gazette of the FRY 22/94

community, the Council coordinates its activities with the Ministry in charge of environmental protection. The most important tasks of the Council include the coordination of activities aimed at elaborating and implementing a series of strategic documents, such as the National Sustainable Development Strategy and the National Environmental Action Programme. The elaboration of the Strategy of the Sustainable Use of Natural Resources and Heritage, Strategy for Maintaining Biodiversity and the Strategy for the Introduction of Clean Technologies is also under way.

The legal regulations in the field of the environment have already been aligned in certain areas with the relevant EU regulations¹⁷; it is realistic to expect that the alignment will have been completed by the end of 2009. The full implementation is expected to take place in the period from 2010 to 2014.

7. Gender equality and the empowerment of women

Serbia lags behind the other countries of the region in devising mechanisms to promote gender equality and in the legal regulation of that area. The work on the Law on Gender Equality has begun, as well as the work on the National Plan of Actions. The Report on the implementation of the Convention on the Elimination of Discrimination against Women (CEDAW Report) has been completed, but has not been submitted yet. A Gender Equality Council was set up recently within the Government of the Republic of Serbia, while a body in charge of gender equality functions in the National Assembly. Government institutions in Vojvodina include the Secretariat for Labour, Employment and Gender Equality which has achieved remarkable results in its work, as well as the institution of ombudsman. Focal points for gender equality exist in fifteen municipalities in Serbia.

In 2002, the Law on Local Election Quotas was adopted, providing for the mandatory selection of 30 per cent of candidates of the less represented gender and their even inclusion in candidates' lists, which contributed to the increase of women's representation at the local level. For the first time, the Criminal Code of the Republic of Serbia (2002) treats family violence as a criminal offence (Art. 118a), while the new Family Law (2005) treats violence against women as a social, rather than a personal, problem of a woman and provides for the measures of protection of family members against the abuser. Because of the increase of violence in everyday life and the complexity of the phenomena and the longer exposure to violence, especially to family violence, it is necessary to adopt a National Strategy against Violence in Everyday Life.

It is expected that Serbia will continue to align its regulations with European and international standards, which implies continued extensive development of mechanisms at all levels and adoption of appropriate laws.

8. Better protection of vulnerable population groups

In the context of its basic priorities related to faster employment, efficient social protection and a better access to services in the field of health, education and housing, the Poverty Reduction Strategy emphasizes an urgent need to devote special attention in the realization of these priorities to the most vulnerable population groups. This includes the reduction of poverty among refugees and displaced persons, children and youth, persons with disabilities, Roma and women.

Better protection to vulnerable groups should be provided primarily through the application of active employment measures. This also calls for the implementation of specific programmes for each above-mentioned vulnerable group. Thus, for example, the "Service of Personal Assistants to Persons with Disabilities" programme, carried out in several municipalities in Serbia, encouraged persons with disabilities to become active and to work and enabled employment of personal assistants and their removal from the list of employed. Similarly, research has shown that the raising of the Roma general education level is an essential prerequisite for their better employment. In addition to an efficient inclusion of Roma children in the formal education system, it necessitates the inclusion of adult Roma, too, in education programmes, designed within active employment measures, for the acquisition of knowledge and skills for which there is a demand on the labour market. The implementation of the programmes, aimed at encouraging women to become entrepreneurs would contribute to the faster employment of women, acquisition of property and the raising of the earnings level.

¹⁷ The Law on Environmental Protection, Law on the Integrated Prevention and Control of the Pollution of the Environment, Law on the Strategic Assessment of Environmental Impact and the Law on the Assessment of Environment Impact, December 2004.

PART TWO

PROGRESS ASSESSMENT AND THE PACE OF MDGs IMPLEMENTATION UNTIL 2015

Goal 1: Eradicate extreme poverty and hunger

Target 1: Halve, between 1990 and 2015, the proportion of people whose income is less than a dollar a day.

Target 2: Halve, between 1990 and 2015, the proportion of people who suffer from hunger

SUMMARY

Goal 1 is accorded great importance in the United Nations Millennium Declaration. Poverty in underdeveloped and developing countries is a consequence of the population income that is insufficient to meet the existential needs. Poverty is also caused by a low level of the national per capita income, derived from the insufficient participation and insufficient social inclusion of the population in the labour market in the sphere of the use of social services, including education, health or utilities. A dynamic economic growth would facilitate a lasting improvement of the social and economic condition of the most vulnerable population segments in Serbia.

Targets specific for Serbia by 2015

1. Achieve a dynamic and sustainable economic growth
2. Reduce unemployment, especially long-term unemployment and the unemployment of the young;
3. Reduce the proportion of people living on less than US\$ 2.4 a day;
4. Reduce the poverty of vulnerable groups – Roma, refugees, IDPs, children and the elderly;
5. Reduce regional development disparities;
6. Create conditions for the emergence of strong and stable middle classes;
7. Adopt a National Plan for the achievement of social inclusion

THE STATE OF THE ART AND TRENDS

The Poverty Reduction Strategy was adopted in mid-2003. The statistical-analytical basis for the elaboration of this Strategy was the *Survey of the Living Standards of the Population for 2002*. It was established that the national poverty line for 2002 was at US\$ 2.4 a day per consumption unit for the average 4-member family¹⁸.

On the basis of this value of the poverty line, there were approximately 800,000 poor people in Serbia, excluding Kosovo and Metohija, i.e. 10.6 per cent of the overall number of population. The poor amounted to 7.8 per cent in urban areas, while that percentage in rural areas stood at 14.2.

However, poverty in Serbia had a specific trend ever since the beginning of the transition. It was determined by the socio-economic conditions of the development in the period from 1989 to 2001; it is therefore necessary to assess that period. It is important to point out that the data sources of the official statistics (*Survey of Household Consumption*) are used for the afore-mentioned period; from the methodological aspect, they are valid for the assessment of this trend, but, by the method of data collection and processing, they differ from that applied in the *Survey of the Living Standards of the Population*, used in the elaboration of the Poverty Reduction Strategy.

What characterized Serbia prior to 1990 was a relatively high level of the socialization of its economy. Wage and salary levelling was the target of income distribution, while the government maintained the prices of basic products and utilities at a level lower than the one that would have been dictated by economic criteria. The purchasing power of the population was considerably higher than its income. Consequently, the rate of income poverty for Serbia, excluding Kosovo and Metohija, calculated on the basis of the data from the *Survey of*

¹⁸ The national poverty line includes spending on food, clothing, footwear, hygiene, household furniture, transport, health protection, education etc. It has been set as the overall consumption of the households whose food consumption equals the minimum consumer basket - the daily intake of 2,288 calories. *Poverty Reduction Strategy*, Government of the Republic of Serbia, Belgrade, 2003

*Household Consumption*¹⁹ whereby the consumer basket published regularly by the Federal Statistical Office²⁰ is taken as poverty line, amounted in 1988 to only 13.6 per cent. Under the official exchange rate of the dinar which, admittedly, was unrealistic due to the lack of all markets (except the commodity market), including the financial market, the daily value of the poverty line in 1988 amounted to US\$ 0.72²¹.

The inequalities in the distribution of consumption items as per household income amount were small (the Gini coefficient in 1988 was 18 per cent.).

In the period 1990 – 2000, the GDP, calculated in US dollars under the World Bank methodology, was reduced by 70 per cent. According to the data from the *Survey of Household Consumption*, the rate of income poverty in 2000 amounted to 33.3 per cent. About the same percentage of the population were just above the poverty line as almost 70 per cent of the population of Serbia lived on less than one dollar a day. The Gini coefficient fell under 20 per cent²² and the middle classes disappeared.

Following the change of government at the elections held in September 2000, Serbia embarked upon an extensive process of economic reforms. Considering that the Serbian economy and society in 2000 were at the so-called transition bottom and that the population ought to have been encouraged to support the reforms²³, the international community extended aid to Serbia through donations and other loans under exceptionally favourable conditions. In addition to investments in social infrastructure (roads, power plants, schools, hospitals and institutions of social welfare), the new government decided to service the public debts it inherited from the previous government. They included the payment of late children's allowances, public welfare, low-pension subsidies and the foreign-currency savings that the state, as guarantor, froze in state banks as early as 1991 (the re-payment funds are provided through the budget of the Republic of Serbia). The re-payment of public debt in the areas of child care, welfare and retirement/disability insurance from international donations and the service of foreign-currency savings debts, as well as the general increase of wages and salaries and the salary rise of teachers, doctors and nurses and those employed in the judiciary whose income was very much below the average until 2000, accounted for a significant increase of the population income within the family budget. Wages and salaries rose also in the corporate sector as the liberalization of prices and foreign trade had a favourable effect on the production.

¹⁹ The process of transition in the former SFR of Yugoslavia, and by extension in Serbia, was initiated by the 1989-1990 reforms. The developments in those years affected the *Survey of Household Consumption*. We therefore consider that 1988 suits the assessment of the long-term trend of poverty in Serbia excluding Kosovo and Metohija more since available data enable a reliable calculation of poverty indices for this area.

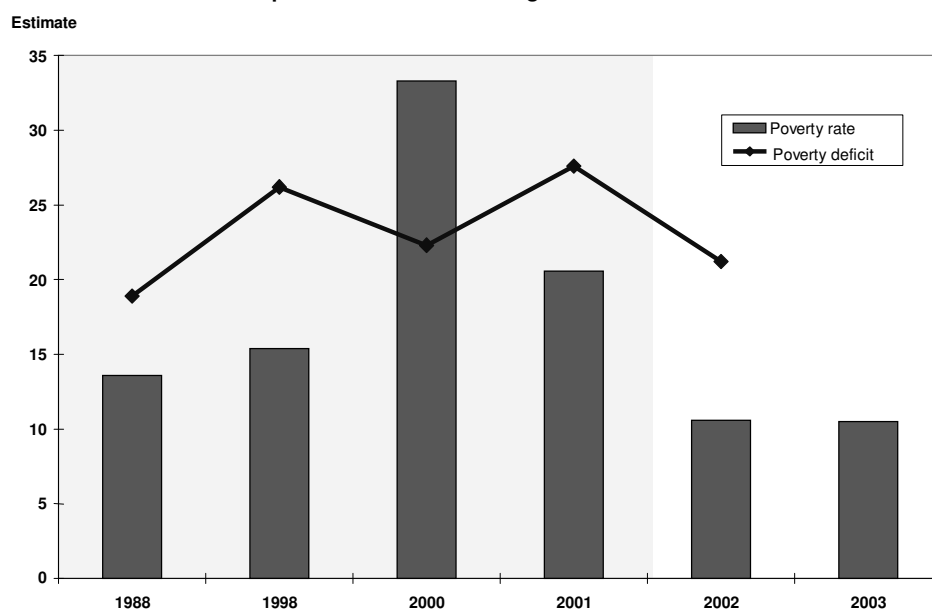
²⁰ The statistical consumer basket contains the values of spending on food and beverages for the average 4-member family under nutritionist standards. According to our calculations, this value covers existential needs customarily taken into account in calculating the poverty line.

²¹ The per capita GDP in the SFR of Yugoslavia, calculated in US dollars according to the purchasing power was 2.1 times bigger in 1985 than the GDP, calculated in US dollars according to the official rate of exchange, while in 1990 it was bigger 1.9 times. (See *Statistical Yearbook of Yugoslavia 1993*, Federal Statistical Office, p. 441). Serbia, excluding Kosovo and Metohija, in 1988 had about the same per capita social product as the SFR of Yugoslavia (SFRY DIN 6,290.00, Serbia, excluding Kosovo and Metohija DIN 6,260).

²² *Report on Transition in Serbia and Montenegro*, G17 Institute, Belgrade, 2004.

²³ The index of the subjective economic situation of the G17 Institute, calculated on the basis of the G17 survey on population income and positions, showed that over a half of respondents in the first half of 2001 assessed that the then economic situation of was bad. *G17 Bulletin*, August 2001, G17 Institute, Belgrade.

**Poverty Rate and Poverty Deficit
Republic of Serbia Excluding Kosovo and Metohia**



NB: The above graph presents the poverty indices for 1988, 1998, 2000 and 2001, calculated on the basis of the *Survey of Population Consumption* of the Federal Statistical Office; for 2002, they have been taken from the Poverty Reduction Strategy and for 2003 from the presentation of Gorana Krstić at the Conference on the Implementation of the Poverty Reduction Strategy at Plandište on 22 February 2005.

All this accounted for a substantial reduction of the number of the poor in the overall population already in the first year of the democratic changes. In 2001, the rate of income poverty of all households stood at 20.6 per cent, 22.1 per cent of urban (non-agricultural) and 17.7 per cent of rural (agricultural) population²⁴.

The results of the *Survey of Living Standards* for 2002 have shown that poverty in Serbia is closely related to education levels, unemployment (exceeding the average population poverty risk by 59.4 per cent²⁵) and old age. People over 65 accounted for almost one fourth of the poor, children for 10.3 per cent.

The *Survey of Living Standards* for 2003²⁶ has shown that the rate of overall poverty is maintained at the level of 10.5 per cent. Slightly more than one half of the poor in 2003 were the newly poor, the workers who lost their job in the process of restructuring and privatization of enterprises. On the other hand, one half of the poor from 2002 exited the poverty zone. The results of the Survey show that they were the people who found a job in 2003. This indicates that unemployment is the main generator of poverty in Serbia.

However, there are considerable differences between the height of the rate of registered unemployment and the comparable rate of unemployment under the *Survey of Labour Force*²⁷. Consequently, the rate of registered unemployment in 1997 was 22.5 per cent and the comparable rate of unemployment under the *Survey of Labour Force* 17.0 per cent, while in 2003 they stood at 31.8 per cent and 20.2 per cent respectively. In 2004, the methodology of the registered unemployment assessment was changed, i.e. aligned with the relevant ILO methodology, to include only those registered unemployed looking actively for a job and in January 2005 the

²⁴ *Report on Transition in Serbia and Montenegro*, G17 Institute, Belgrade, 2004. (Poverty indices calculated on the basis of the data of the Survey on Household Consumption of the Federal Statistical Office).

²⁵ The poverty risk is defined as the increase of the poverty index percentage of the observed group in relation to the average poverty index of the overall population. Ibid.

²⁶ Gorana Krstić, the presentation at the conference "Implementation of the Poverty Reduction Strategy in Serbia", Plandište, 22 February 2005.

²⁷ The comparable rate means that, in calculating the rate of unemployment on the basis of the data from the *Survey of Labour Force*, the pollster does not include farmers employed in the private sector considering that regular employment statistics does not observe this category.

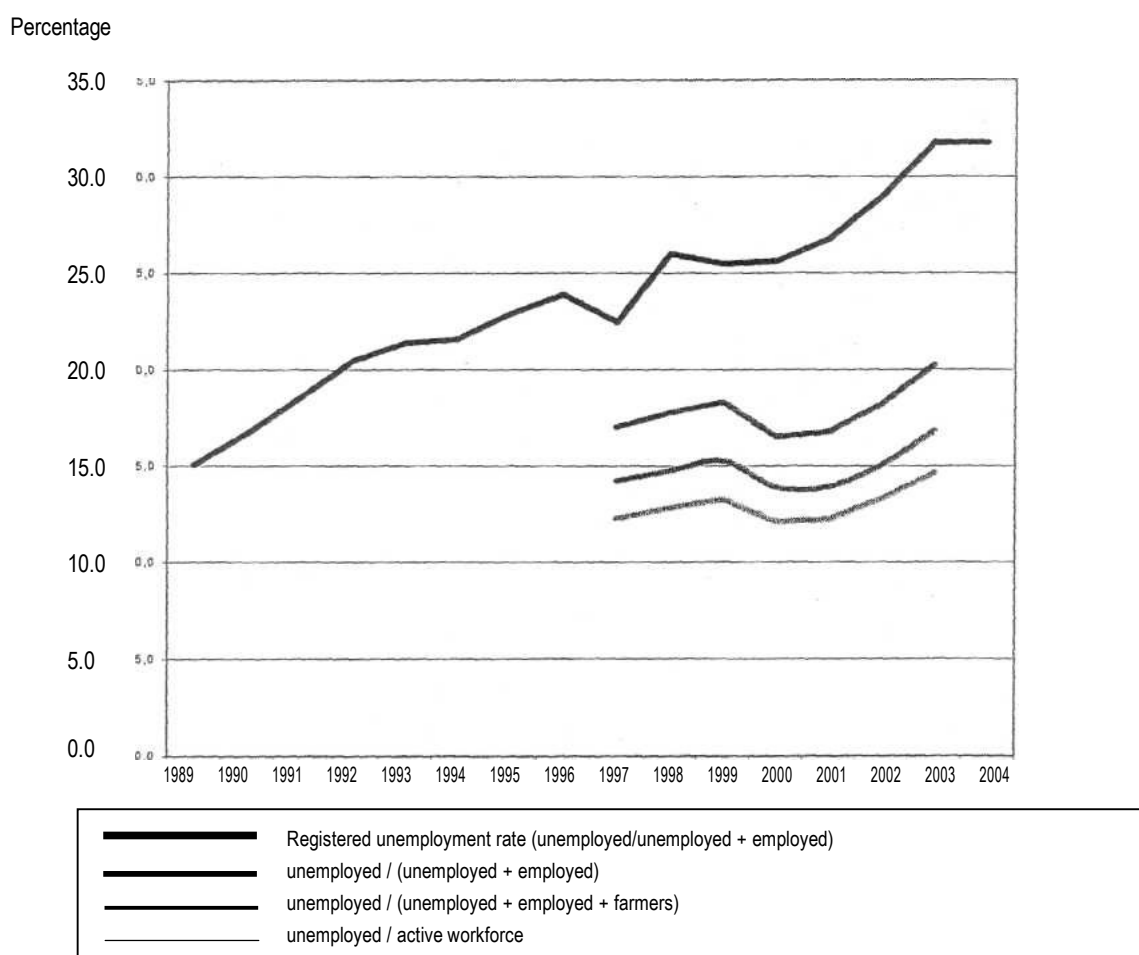
number 865, 678 (109,734 less than the total number of registered unemployed) and the unemployment rate stood at 30.0 per cent.

It takes long to find a job in Serbia. Over 75 per cent of the unemployed wait for employment longer than one year, 33 per cent between one and three years and 42 per cent over three years²⁸. The proportion of the young unemployed aged 15 to 24 years in the overall number of unemployed is slightly more than one fourth.

Greater employment is the precondition for the reduction of poverty across the board, by regions and by socio-economic population groups.

About 67 per cent of the Roma living in Roma settlements is poor, while 11.2 per cent is extremely poor. The unemployment rate among the Roma is twice as big as that among the overall population. Among the employed Roma, 90.0 per cent are underskilled or unskilled. 60 per cent of the Roma living in Roma settlements over 15 has no primary education or has not completed primary school, which is 3.5 times more than among the overall population. Two thirds of the Roma live in unhygienic settlements with high health risks²⁹.

Rate of Registered Unemployment and under the Survey of Labour Force Serbia excluding Kosovo and Metohija



²⁸ Report on Transition in Serbia and Montenegro, G17 Institute, Belgrade, 2004.

²⁹ Poverty Reduction Strategy in Serbia, Challenges and Possibilities at the Local Level, Standing Conference of Cities and Municipalities, Belgrade, 2004.

By their economic and social status, refugees and IDPs belong among particularly vulnerable groups in Serbia. Those of them living in collective accommodation centres are in the most difficult situation. 270,000 refugees and 200,000 IDPs live in Serbia excluding Kosovo and Metohija. It is estimated that about 120,000 refugees and IDPs belong in the category of poor³⁰.

Persons with disabilities also belong among vulnerable groups. Only 13 per cent of persons with disabilities have an opportunity to work, one third of them have working conditions adapted to their needs³¹.

Particularly vulnerable among people over 65 are farmer pensioners and supported old people.

The recent research shows that child poverty in Serbia has many faces since children and parents define poverty not only as a material, i.e. economic problem, but point also to the education, health, social, geographic and cultural deprivation³². The Government of the Republic of Serbia adopted a National Plan of Actions for Children, defining the country policy towards children until 2015. This document is aimed at approaching in a systematic way the problem of the social status of children that arose in the period of crisis and transition.

Women in Serbia are in a worse economic situation than men. More women earn no income or their earnings are lower than those of men, wait for, and seek, a job longer³³. This provides eloquent evidence that women are subject to poverty more than men.

RECOMMENDATIONS

The *Poverty Reduction Strategy* was adopted in Serbia in 2003. The *Strategy* indicates the targets to be achieved in order to reduce overall poverty and the poverty of vulnerable groups at national, regional and local levels. The main targets set forth by the *Strategy* are:

- **Reduce the proportion of people living on less than US\$ 2.4 a day**

The *Poverty Reduction Strategy* is pointedly development-oriented as the low per capita GDP level and high unemployment are the main causes of poverty. It is therefore necessary to ensure, through harmonized macroeconomic policy mechanisms, a sustainable and dynamic economic growth and development at an average 5 per cent annual rate and increase employment. This necessitates determined efforts to continue the economic and social reforms and build institutions of a modern and efficient state, based on the rule of law, as well as Serbia's integration in European integration processes.

- **Reduce unemployment, particularly the long-term youth unemployment**

At the beginning of 2003, the Government of the Republic of Serbia adopted the *Strategy on SMEs and Entrepreneurship Development*, while the *National Employment Strategy* is expected to be adopted soon. The mechanisms provided for in these documents should facilitate an effective development of the existing, and the establishment of new, SMEs, aimed at creating new jobs and increasing employment. Preparations are under way for the elaboration of a *National Action Plan for Employment* that will provide for measures and activities for the implementation of the *National Employment Strategy*. They should accentuate:

- addressing the problem of the employment of youth and the long-term unemployed;
- increase of investment in the development of human resources and its effectiveness;
- strengthening support for SMEs;
- increase of the flexibility of the labour force market with the aim of creating conditions for social inclusion of vulnerable population groups;
- implementation of active employment measures;

³⁰ *Poverty Reduction Strategy in Serbia*, Government of the Republic of Serbia, Belgrade, 2003; *Poverty Reduction Strategy, Challenges and Possibilities at the Local Level*, Standing Conference of Cities and Municipalities, Belgrade, 2004.

³¹ *Poverty Reduction Strategy in Serbia, Challenges and Possibilities at the Local Level*, Standing Conference of Cities and Municipalities, Belgrade, 2004.

³² *Poverty with Many Faces, A Survey of Poverty in Serbia*, UNICEF, Belgrade, 2004.

³³ *Competition of Women with Children at the Labour Market*, Group for the Promotion of Women's Political Rights "The Voice of Difference", Belgrade, 2002.

- reforms of institutions of the labour market with the aim of ensuring effectiveness in the process of the implementation of the *National Employment Strategy*;
 - creation of local coalitions with the aim of achieving economic growth and increasing employment and competition at regional and local levels; and
 - establishment of local Employment Councils.
- **Reduce poverty of vulnerable and economically and socially insufficiently included groups such as the Roma, refugees, IDPs, persons with disabilities, children, and the elderly**

The raising of the general education level of the Roma is an essential precondition for the improvement of the level of their economic and social inclusion. To that end, the realization of a set of programmes in the fields of education and employment has been envisaged. To ensure effective realization of those programmes, it is necessary to establish cooperation with Roma communities and develop partnerships in their implementation. Also, it is necessary to ensure normal housing conditions for Roma families. At the beginning of 2005, the Government of the Republic of Serbia adopted action plans for Roma education, health, housing and social policy.

A *National Strategy for Refugees and IDPs* has been elaborated in the context of the achievement of the goals related to the solution of the problem of refugees and IDPs, as well as for the reduction of their poverty. The implementation of the *Strategy* should contribute to address the existential questions of that vulnerable group more effectively with the aim of reducing poverty risks.

To reduce the poverty of persons with disabilities, it is necessary to create conditions for the improvement of their economic and social inclusion, primarily by way of their participation at the labour market and by providing better access to education and health services. Also, it is necessary to ensure government assistance to a broad implementation of the “Service of Personal Assistants” programme, the realization of which has begun with the financial assistance of donors.

The reduction of child poverty is an exceptionally important goal for Serbia and it should be realized through:

- ensuring assistance to children and families that find themselves in the poverty zone;
- prevention of poverty effects in the communities that, because of poverty, generate the transfer of poverty to future generations; and
- affordability and improvement of the quality and efficiency of the provision of social services to children³⁴;

In respect of women, it is necessary to ensure their proper participation in the economy, at the labour marking and in decision-making.

- **Reduce regional poverty differences**

The process of EU approximation necessitates new institutional solutions and mechanisms to support regional development. New institutions and mechanisms should encourage investors to invest in less developed regions. This would be the driving force behind the reduction of regional poverty.

- **Create conditions for the emergence of strong and stable middle classes**

It is estimated that it is realistic to expect that stable middle classes will have emerged by 2015 and that the quality of the living standard will increase, especially the quality of nutrition of all population categories. The achievement of this target implies a more even distribution of the family income according to the level of family consumption income that will be established by honouring distribution mechanisms based on properly paid work and a higher level of competition. This will bring about an increase of the Gini coefficient of available consumption resources. Strong and stable middle classes are an important precondition for a successful evolution of democratic processes in Serbia.

- **Adopt a National Plan of social inclusion**

³⁴ *National Plan of Action for Children*, Republic of Serbia, Belgrade, 2004

In accordance with the activities unfolding in the European Union in this area³⁵, it is necessary for Serbia to ensure in the period until 2015, an ever higher level of social inclusion at the labour market in the sphere of the use of social services. To that end, it is necessary to ensure an information system on the basis of which this process will be monitored and its efficiency assessed.

³⁵ Mikhail Arandarenko, *National Strategies to Fight Poverty that Shape Social Inclusion Programmes in the Countries of South Eastern Europe: Millenium Development Goals, Poverty Reduction Strategies and the Social Programme of the European Union*, January 2005.

Goal 2: Achieve universal primary education

Target 3: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling

SUMMARY

Among the MDGs, education is particularly important as it represents one of the preconditions for the realization of all other important goals (reduction of poverty, raising health culture, gender equality and environmental protection and development).

The right of education in Serbia was guaranteed by the Constitution already in 1955, as well as by laws and signed and ratified international declaration and conventions³⁶. 8-year primary education is compulsory for all, irrespective of sex, religion, language, health or national, cultural, social or any other belonging.

However, serious problems emerged in the development of education; budget allocations to education were reduced over time, while great social changes, transition and a serious economic crisis during the 1990s had an additional negative effect on the situation in education³⁷. All this affected education in Serbia.

The education system of the Republic of Serbia was devised in the period of socialism (1945 – 1990), incorporating some very important democratic principles:

- right to compulsory, universal, free primary education for all;
- right of national minorities to educate themselves in their mother tongue (for large minority groups such possibility is available until university);
- extensive subsystem for the education of children with special needs; extensive and geographically well spread network of schools and other education institutions at all education levels;
- experienced teachers possessing adequate teaching skills;
- education was a budgetary priority.

The main results of the system conceived in this way were: the possibility that all achieve the right to education and the raising of the general level of literacy in the country, particularly among younger generations.

³⁶ Constitution of the Republic of Serbia; Law on Primary School; Law on Secondary School; Universal Declaration of Human Rights, Art. 26; Convention on the Rights of the Child, Arts. 28 and 29; International Covenant on Economic, Social and Cultural Rights (ICESCR), Art. 13; *Education for All*; Law on the Basic System of Education and Upbringing (Amendments 2004).

³⁷ Education impoverished abruptly in all its aspects (dilapidated school buildings and classrooms, lack of teaching aids, drastic fall of teacher's salaries, which accounted for the lack of work motivation, teacher drain, obsolescence of teachers' skills and knowledge etc.). It accounted for the marginalization of education in society, which reflected on its quality and effectiveness (A Comprehensive Analysis of the System of Primary Education in the FR of Yugoslavia, UNICEF 2001, Belgrade; A. Pešikan, *Education in the Circumstances Changed by War, Poverty and Transition, Seen through the Eyes of A Teacher*, Z. Krnjaić and D. Plut (Ed.): Social Crisis and Education: Document of a Time, Institute for Psychology, Belgrade, 2005)

THE STATE OF THE ART AND TRENDS

Enrolment of children in primary schools. Regardless of the right to primary education guaranteed by law, some segments of the population fail to exercise that right, above all children in rural areas, Roma children and children with special needs³⁸.

The data on the enrolment of children differ, depending on source. Although the data on the enrolment rate are high and range from 94 to 99 per cent (Table 1), they should be interpreted with caution as these statistical processes conceal the data on vulnerable groups (those data are either unavailable or different, depending on source, or concealed by data average); secondly, the *oscillations in the rate of enrolment of children in primary school* are explained primarily by the manner of calculation³⁹.

The average enrolment rate, according to estimates, is about 97 per cent and does not differ significantly by gender (e.g., in 2003, the enrolment rate for boys was 98.4 per cent, and for girls 98 per cent, ESD – MES⁴⁰). Enrolment and completion rates were influenced by a sizable influx of students – refugees or IDPs, particularly in 1994/95 and 1998/99 school years. The rate of enrolment of children in rural areas was 92.3 per cent (FAO, 2003), and refugee children 92 per cent (NIRCS, 2001).

Enrolment data for Roma children are not reliable and their exact number is not known (it is estimated that the number of Roma in Serbia is 3-4 times larger than officially recorded). A large number of Roma children who should attend regular school is enrolled in special schools (sometimes they make up to 80 per cent of students). According to data, there are more boys (77.9 per cent) than girls (69.7 per cent) among Roma children in primary school (ESD, MES). A graphic illustration of the education of Roma children are the data that 20 per cent of those children are covered by primary education, while only 13.1 per cent enrol in secondary schools compared with 70 – 80 per cent of non-Roma population (ESD, MES).

The Vlachs are a small minority with a very low education level (55 per cent without primary school and 26.9 per cent with primary education), particularly of women (67.62 per cent without and 22.67 per cent with primary school, Annex 2.2., Table 2.2.1).

There exist no exact records of the children with special needs in Serbia and, for that matter, systematically gathered data on their enrolment in regular schools. A survey of a sample of schools has shown that 85 per cent of those children are in regular schools (UNICEF, 2003), but, according to experts' estimates, about 15 per cent of them are not entered into the system at all, which affects their right to education.

³⁸ There are considerable disagreements on the terminology used to define these children: *handicapped children, children with special needs, children with disability, children with difficulties in development, children with reduced capabilities* etc. The law uses *children with special needs*. Some experts consider that the definition from the UN Convention on the Rights of the Child should be accepted in which it is said that “a child with special needs is a child with disability, and a child with a disability is **a child**” (S. Hrnjica (Ed): *School Befitting the Child*, Institute for Psychology, Save the Children, Belgrade, 2004, p. 11; S. Hrnjica and D. Sretenov: *Children with Special Needs in Serbia – The State of the Art and Position Preconditions for Potential Inclusion*, UNICEF and Save the Children, Belgrade, 2003).

³⁹ In calculation, different assessments of the number of inhabitants of that age have been used (Consultations: D. Bjeloglav).

⁴⁰ Education Statistics Department of the Ministry of Education and Sports

Table 1: Percentage of children who enrol in primary schools, are promoted to the 5th grade and complete primary education

		1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Children enrolled in primary schools	percentage	98.9*				99.8*				101.4*		98.5	94.7	96.1	94.3 98.2**
Enrolment rate of Roma children														73.9**	
Children who enrolled and completed primary schools	percentage					90.8	91.0	94.1	94.3	95.0	94.8	92.0	91.8	94.5	94.7
Children promoted to the 5 th grade	percentage	94.9#									96.3#	92.7 93.5"	96.9	97.5	93.9
Roma children covered by primary education	percentage														20

Sources: DevInfo

* Comprehensive Analysis of Primary Education in the FR of Yugoslavia, UNICEF 2001, Belgrade

National Report on the World Summit for Children Follow-Up (NIRCS), Belgrade, 2001.

" Survey of Multiple Indicators of the Health Situation and Behaviour (MICS), UNICEF 2000

** Data obtained from the Education Statistics Department, MES

Increase in the pre-school education coverage which in 2003 stood at 37.3 per cent⁴¹ would bring about an increase of the number of children who enrol in primary school among all children groups. This would be particularly important for Roma children as they would be provided an opportunity to learn the Serbian language and acquire necessary background for school.

A number of students who do not enrol in primary school or drop out, frequent schools for adult education, but no exact records are kept on their number (even 90 per cent of students are children aged 15 – 18 years who dropped out of primary school, according to Zindović, 2001).

The data on the enrolment and completion of primary education have not been prepared on the basis of monitoring the cohort (Annex 2.2., Table 2.2.2.) and are in reality lower. If the statistical data on the percentage of persons over 15 who have not completed primary education (Annex 2.2., Table 2.2.3.), as well as the number of illiterate in the country, are taken into account, it transpires that these high percentages are questionable and it is more likely that the rate of the completion of primary education is about 85 per cent.

Nevertheless, in the period from 1991 to 2002, the trend of the increase of the number of persons who have completed primary education was in the ascendant. For example, the number of persons aged 15 or over who have completed primary education increased from 2/3 to 4/5. The problem is in the level of factual and functional literacy of the persons who have completed primary education.⁴²

⁴¹ DevInfo, Basis, 2005

⁴² For example, 59.7 per cent of eight-graders in Serbia have not even one-half of basic knowledge of natural sciences, 52.2 per cent of mathematics or 22.8 per cent of the mother tongue (UNICEF, 2001).

Promotion to the fifth grade and the dropping of children out of primary education. According to available data, 92 – 97 per cent of children enrolled in the first grade are promoted to the fifth grade of the primary school (about 92 per cent in rural areas, about 95 per cent in urban). If the percentage of children who do not enrol in the first grade is added to the percentage of children who do not reach the fifth grade, the dropout percentage per generation amounts to worrisome 5 – 15. This proves that the education system does not yet provide all children the possibility to exercise their constitutional right to education.

On the basis of insight into available data, it transpires that the main dropout groups of children are Roma children, children in rural areas and children with special needs. Evidently, the existing system is not sufficiently flexible to meet the needs and possibilities of children growing up in specific conditions wherefore the dropout percentage of exactly those children is highest (Annex 2.3.).

There are no reliable data on the dropout of children during primary education. For an exact percentage of children who drop out of school, it would be necessary to monitor the cohort. According to available data, children from rural areas drop out the most (mostly between the 5th and 8th grades, girls more than boys), followed by children with special needs (both in primary, and even more in secondary school) and Roma children. The most serious situation is among Roma children: they have high dropout rates, already after 2 – 3 years of schooling. It is estimated that between 3 and 10 per cent of the overall number of the enrolled Roma children do not frequent primary schools (Education for Rural People in Serbia, FAO Assessment Mission, 2003).

Literacy of the young aged 15 – 24 years. There are positive trends in Serbia regarding population literacy (Annex 2.2., Tables 2.2.4. and 2.2.5): the number of women and men who have not completed primary education has dropped (by 12.8 per cent among women and 10.4 per cent among men); the percentage of population with secondary education has increased (women – 9.48 per cent, men – 8.48 per cent) and with secondary and tertiary education (women – 2.52 per cent, men – 1.6 per cent). The overall number of illiterate women and men over 10 years reduced by a half in between the censuses. 39.2 per cent of illiterate in this age group are the Roma: men 35.5 per cent, women as much as 51.6 per cent.

The percentage of the young aged 15 – 24 years that attained literacy increased from 87.4 per cent in 1991 to 94.3 per cent in 2002, while the percentage of those without complete primary education was halved (from 12.6 per cent to 5.7 per cent, SOR). The percentage of those who acquired higher than primary education trebled⁴³, but the percentage of persons who have full or incomplete primary education continues to be very high (78.3 per cent in 1991 and 47 per cent in 2002), particularly if the functional skills of those with full primary education and requirements of modern-day economy are taken into account. A new trend of women acquiring education higher than men is noticeable, too.

Education Level of the Population of Serbia aged 15 – 24 Years

	Overall number	Without primary education	Primary education	Secondary education	Higher education	High education	Unknown
Total	1008080	5.7 per cent	41.3 per cent	48.7 per cent	0.9 per cent	0.45 per cent	2.9 per cent
Male	514585	5.9 per cent	41.1 per cent	48.9 per cent	0.7 per cent	0.3 per cent	3.0 per cent
Female	493495	5.4 per cent	41.5 per cent	48.6 per cent	1.2 per cent	0.55 per cent	2.8 per cent

Few tests of functional literacy have been made in Serbia and they point to a very low applicability of acquired knowledge (Š. Alibabić.; *Functional Literacy and Self-Education*, IPA, Faculty of Philosophy, Belgrade, 1994).

⁴³ In general, from 21.7 per cent in 1991 to 58.7 per cent in 2002, but this number should be reduced by the number of those who do not continue education after primary school and who drop out during secondary education. No data are available on that number.

Source: Statistical Office of the Republic, Census 2002

The new goal that, no doubt, should be set in respect to the population aged 15 – 24 years is to complete some kind of secondary education. This is the minimum that will enable it to be included in the process of work and to help the development of the country as a whole.

RECOMMENDATIONS

To achieve Goal 2 by 2015, it is necessary to take the following measures:

- by 2015, increase spending on education to 6 per cent of the GDP which has a direct effect on the increase of the quality of education for all children (3.4 per cent in 2003; 3.9 per cent projected for 2005);
- improve the methodology of education statistics: some data are missing, there are disagreements about data; it is necessary to add new parameters necessary for monitoring MiDG realization; monitor specified data (by gender, health condition, region, national, ethnic, social belonging); monitor the cohort (particularly at enrolment and completion of primary education) and supplement data series;
- establish a central register of children with special needs; in addition, it is necessary to work on their earlier detection and the definition of criteria for their categorization;
- increase the coverage of pre-school education, especially of children from vulnerable groups (Roma children, children with special needs). Cover all children with preparatory pre-school programme (age 5 – 6.5 years). The children who have been outside the system thus far would be included in it in this way and their inequality with the rest of the population would be reduced;
- it is necessary to work on the improvement of conditions and the quality of the education of children in small schools by combining classes as the quality of their achievement is considerably weaker than the national average (See *National Testing of the Education Achievement of the Students of the Third Grade of Primary School*, Institute for the Evaluation of Education and Upbringing, 2005);
- define the status of education reform in Serbia and ensure a stable development in this field, primarily by adoption of a long-term national education strategy and by ensuring consensus for its implementation;
- draw up measures on improving the quality of education acquired by students primarily in primary education. By raising the quality of education, meeting the interests, needs and possibilities of students, it is possible to reduce the number of dropout children in primary schools;
- make the education system more flexible and passable (possibility of “second chance”). Risk group students should be accorded positive discrimination at enrolment in secondary schools, because it is the only possibility for them to acquire a vocation and exit thus the vicious circle of poverty;
- survey the functional literacy of the young aged 15 – 24 years, accentuating vulnerable groups;
- it is necessary to carry out a systematic research of dropout causes and factors in primary education.

Serbia may realize the goal of achieving full primary education by 2015 by way of committing all resources, domestic and foreign, and undertaking the measures envisaged in main strategic documents⁴⁴ and in this MDGs Review

⁴⁴ Primarily, the National Plan of Actions for Children, Poverty Reduction Strategy, Consolidated Action Plan for the Improvement of Roma Education in Serbia, Strategy of Secondary Education, Adult Education Strategy, National Plan of Actions for Roma Children, National Strategy for the Roma.

Goal 3. Promote gender equality and empower women

Target 4: Eliminate gender disparity in education, employment and poverty by 2015 and increase empowerment of women at all levels

Demographic Characteristics and Gender

Women make up 51.4 per cent of the total population of Serbia (2002)⁴⁵. In between the last two censuses, the proportion of women in the total population increased, particularly in urban areas, as a result of differences in average life expectancy, impact of wars and emigration. The life expectancy for men is 69.7 years and 75.0 years for women (2002)⁴⁶. The population of Serbia is aging rapidly: in 2002, the average age of women was 41.5 and of men 39.0 years⁴⁷.

The basic demographic problem of Serbia are very low fertility rates, which are below the simple population regeneration level, with a declining trend prior to 1999 and a slight recovery after 2000⁴⁸, which could be interpreted as a consequence of an improved social climate after the end of the wars and democratic changes, i.e. as a form of a very slight so-called compensation period.

Specific targets

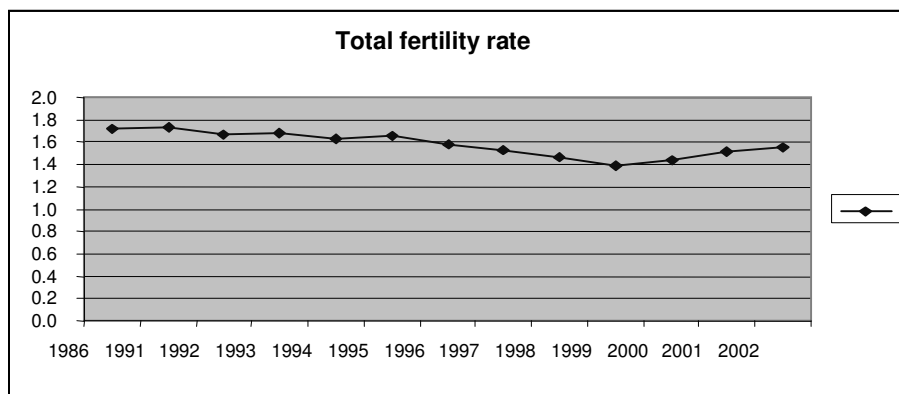
1. Reduction of poverty differences between men and women
2. Reduction of gender inequality in economy
3. Reduction of gender inequality in literacy and education
4. Reduction of gender inequality in political participation
5. Empowerment of women in the public sphere
6. Reduction of violence against women and children.

⁴⁵ DevInfo Database

⁴⁶ DevInfo Database

⁴⁷ *Statistical Yearbook of Serbia 2004*,
Statistical Office of the Republic of Serbia,
Belgrade, 2004, page 58

⁴⁸ DevInfo Database



By and large, the low fertility debate is related in public to the abortion debate. However, the data collected through various surveys indicate that the high abortion rates in Serbia are a consequence of unfavourable economic conditions, political and social climate of insecurity and a lack of perspective, inadequate family and partner relations, low level of general health culture, insufficient affordability of various contraceptives, as well as of very deep-rooted cultural patterns, such as the patriarchal control of female sexuality and the widespread cultural pattern of “sacrificing of women”⁴⁹. Besides, according to research findings, women express higher norms of the desired than the expected number of children, but the realization of the ideal norm is considered impossible and is abandoned. In a word, the reproductive freedoms and/or the rights of women in Serbia are limited at this moment, both through the impossibility of achieving the desired number of children and through social pressure to give birth to unwanted children, by narrowing the right to abortion. The narrowing of the right to abortion increases the risk of female mortality or diminished fecundity due to unprofessional and illegal abortions and has a series of adverse social consequences.

Reduction of Poverty Differences between Men and Women

Poverty, just like its opposite, affluence, is, in great measure, gender-determined⁵⁰, but no data are available in Serbia to establish these differences clearly. The process of the feminization of poverty (the increase of the percentage of women’s participation in poverty), i.e. the pauperization of the female part of the population (the increase of the percentage of presence of the poor in the female part of the population), is an integral part of transition, but it existed earlier as well. Women are affected in more ways and at more levels than one, directly and indirectly, and the greatest part of the negative aspects of their social status is still insufficiently visible and measurable. Women’s poverty is a consequence of long-term discrimination against women, reflected in the under-payment of their work, lower social standing of professions engaged in primarily by women, obstacles to

⁴⁹ The survey of M. Rašević on abortion in Serbia has shown that there is no clear connection between education, marital status, or even the number of children, and the number of abortions. (M. Rašević, *Towards Understanding Abortion in Serbia*, Demographic Research Centre, Belgrade, 1993), on which account it is possible to conclude that cultural factors related to intimate partner relations shape up women’s high readiness for abortion. A similar survey, conducted by M. Blagojević, on positions and practice of parenthood in Serbia has shown that there is no connection between any important social variable and the readiness to have another child. Also, this survey has shown that the model “parenthood as sacrifice” is more widespread among women of low education, i.e. among women who have more traditional value judgments (M. Blagojević, *Parenthood and Fertility: Serbia in the ‘90s*, ISIFF, Belgrade, 1997). For traditional mechanisms of underrating women in Serbian culture and other forms of discrimination in the past and the present, see the Collection: M. Blagojević, (ed.), *Mapping Misogyny in Serbia: Discourses and Practice*, AŽIN, Belgrade, 2000. Also, for women’s withdrawal into privacy in transition, see the survey: M. Blagojević, *Everyday Events from a Woman’s Perspective: Self-Sacrifice and the Flight to Privacy*, S. Bolčić, (ed.), *Social Changes and Everyday Events: Serbia at the Beginning of the ‘90s*, ISIFF, Belgrade, 1995, pp. 181-209.

⁵⁰ In the world, women work 2/3 of working hours, receive 1/10 of income for it and dispose of 1 per cent of world wealth (Humphrey Institute). Only when such data become available for Serbia, (which is not the case now), will there be a clear picture of gender economic inequalities and their injustice.

career advancement or, more recently, in the so-called flexibilization of work which often marginalizes women in a new way.

Women run a greater risk of poverty because poverty risks are more widespread among women: they are unemployed more often than men, single parents, without income and supported persons. In 2002, women accounted for 43.4 per cent of the active population, for 51.7 per cent of persons with personal income and for 61.8 per cent of supported persons⁵¹. Women's age and education structure is worse than men's, they live in single-member households, in elderly households⁵² more often and own less property⁵³. Elderly women in rural areas, Roma women, women exposed to violence, refugee women, visiting women nurses and economically deprived women in large families belong in particularly vulnerable groups⁵⁴.

Women's poverty is determined, in equal measure, by factors influencing the size of poverty within the population as a whole and by the factors related to women alone. This is why the Strategy to Fight Poverty of Women, as well as additional measures related to women in particular, are incorporated in the Poverty Reduction Strategy, with the aim of decreasing rather than increasing inequalities. The newly adopted Family Law protects the rights of parents-guardians to a greater extent than was the case before. It is therefore expected that poverty differences be reduced by increasing employment and education among women, i.e. by increasing their opportunities on the labour market, as well as by providing greater protection to single parents. The preconditions for reducing the poverty of particularly vulnerable women groups include increased visibility of the phenomenon, increased awareness of this problem (now non-existent even among experts), collection of adequate data and regular monitoring, along with the monitoring of the implementation of appropriate measures.

Reduction of Gender Inequality in Economy

Economic inequality between men and women exists in Serbia, is renewed and assumes new forms in transition. Women hold jobs less frequently than men (in 2003, the employment rate of women amounted to 44.3 per cent, and to 55.7 per cent of men; according to the ILO definition⁵⁵, the employment rate of women stood at 15.8 per cent, and 13.8 per cent of men⁵⁶). Women are discriminated against in employment⁵⁷ and career advancement (in 2002, 44 women per 100 men were legislators, managers or government officials, even though the ratio of women to men among experts stood at 112:100⁵⁸). Women have somewhat lower average earnings (in 2003, 97.9 per cent as against 100.0 per cent for men), but the difference is especially visible in certain sectors (in 2003, 83.0 per cent as against 100.0 per cent of men in brokerage)⁵⁹. Professional segregation continues to be very marked and women are concentrated in low-paid sectors (e. g. textile rather than new technologies). Women are more often unpaid helping household members (around 2/3) and carry out unpaid housework to a far greater extent than men (spending 4-5 hours daily more than men in doing unpaid domestic chores)⁶⁰. Of all women, 2.4 per cent own private companies, 3.4 per cent have savings, 16.2 per cent own apartments, 10.8 per cent houses and 9.3 per cent agricultural land⁶¹. It is estimated that the participation of women in the informal sector is relatively high, where they are less protected from sexual harassment and sexual exploitation and where the gap

⁵¹ *Statistical Yearbook of Serbia 2004*, Statistical Office of the Republic of Serbia, Belgrade, 2004, p.

⁵² See *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005

⁵³ M. Puzigaća, *Status and Challenges for Gender Equality in Yugoslavia*, SCAN, Novi Sad, 2002

⁵⁴ *Poverty Reduction Strategy for Serbia*, Government of the Republic of Serbia, Belgrade, 2003

⁵⁵ ILO -International Labour Organization

⁵⁶ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p. 47

⁵⁷ On taking up employment, women are increasingly demanded not to have children; discrimination regarding age and appearance is stepped up, particularly on the part of private employers. Women's trade unions have started collecting data on these phenomena with the launching of a hotline.

⁵⁸ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, pp 48,51

⁵⁹ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, pp 47

⁶⁰ M. Blagojević, *Women and Men in Serbia 1990-2000, Genderization of the Price of Chaos and Serbia at the End of the Millennium, Destruction of Society, Changes and Everyday Life*, Institute for Sociological Research of the Faculty of Philosophy of Belgrade, Belgrade, 2002, pp 283-314

⁶¹ Initial report on the implementation of the *International Covenant on Civil and Political Rights* in the Federal Republic of Yugoslavia, for the period 1992-2002, Belgrade, March 2003. p.22

between men and women wages is greater. Since only 57.4 per cent of household income in Serbia⁶² derives from wages and salaries, it is fair to assume that a large part of gender inequality is manifested precisely in the informal economy. There are indications, but no data, that women are marginalized also in the process of privatization⁶³. The so-called sex industry is in the ascendant, contributing to the strengthening of negative stereotypes of women in general, affecting adversely the sexual exploitation of women in the conditions of high unemployment and social insecurity and threatening, at the same time, the status of women, individual and collective, both in public and private spheres⁶⁴.

Gender employment equality is treated in the National Employment Strategy which incorporates Guideline 6 of the European Employment Strategy. The basic goal is to reduce substantially by 2010 the gap between women's and men's employment and unemployment rates, as well as between their wage levels. The encouragement of social dialogue plays a particularly important role in this process. It is expected that gender inequality will be reduced more rapidly, especially among the young, because of the influence of the education and preparedness of women for the labour market, as well as because of the changes in women's personal strategies (from sacrificing for family to the investment in own social status)⁶⁵. Also, the strengthening of the service sector, in which women are employed more often than men, contributes to the reduction of gender inequality as well. Thanks to the strengthening of the service sector in the period of economic transition, the negative stereotypes of women as servants, caterers or care providers are changing in favour of women and to the detriment of men who held, by and large, blue-collar jobs.

Reduction of Gender Differences in Literacy and Education

At lower education levels, gender inequality has practically been eliminated among the majority population, but still remains within certain minority groups. At higher education levels, Serbia follows the European trend of increasing inclusion of young women which exceeds the participation of young men. Yet, this trend cannot be treated as unequivocally positive; rather it should be looked upon as related to the reduced quality of education since the early 1990s, high unemployment, as well as the extremely underestimated status of education and knowledge on the labour market. Education programmes are androcentric, anachronistic and discriminating and, as such, contributory to stereotyping men and women⁶⁶.

In Serbia, women are still illiterate more often than men, a consequence of inherited differences in men's and women's education; this phenomenon is ever more manifest among older population⁶⁷. Still, women account for 52.9 per cent of university students (2002)⁶⁸. Women represent a majority among the graduate students in arts and sciences (in 2002, 185 women per 100 men studied arts and 143 women per 100 men studied sciences)⁶⁹. Although present at the highest education levels, the differences are diminishing rapidly (in 2002, 48 women per 100 men obtained master degrees and 44 women per 100 men obtained doctor's degrees)⁷⁰.

Further reduction of differences in illiteracy between men and women (bar certain ethnic minorities, primarily the Roma) is to be expected, as well as the elimination, even the reversal, of differences in favour of women, at secondary and tertiary levels. The segregation of education profiles and continued division into so-

⁶² *Household Consumption Survey*, Statistical Office of the Republic of Serbia, Belgrade, 2003

⁶³ In Kikinda, for instance, women were buyers in the privatization of an enterprise in only 17 per cent of cases (A report from the Round Table held in the preparation of the Poverty Reduction Strategy).

⁶⁴ The link between the spreading of prostitution and the threat to women's health has not been studied yet. Nevertheless, there are indications that the increased threat to women, including married women, from sexually communicable diseases and HIV is related to the patriarchal value model favouring the sexual freedom of men.

⁶⁵ This phenomenon was also noted in other countries in transition. It was written about by M. Marody and A. G. Poleszczuk in *Changing Images of Identity in Poland: From the Self-Sacrificing to the Self-Investing Women?*, S. Gal and G. Kligman (eds.) *Reproducing Gender: Politics, Publics, and Everyday Life after Socialism*, Princeton, New Jersey, 2000.

⁶⁶ S. Marinković and A. Pešikan, *Female and Male Stereotypes in Arts and Sciences Textbooks*, Psychology, (1999), pp. 225-240.

⁶⁷ For gender differences in education, see MDGs 2.

⁶⁸ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p.32

⁶⁹ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p.33

⁷⁰ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p.33

called male, and so-called female, professions, however, will continue to obtain with a slight descendent trend. Women will demonstrate greater readiness for additional and permanent education and re-training because they demonstrate greater flexibility on the labour market as well. In future, the lowering of the image of education in the male part of the population, i.e. specific measures of encouraging boys to general education and girls and women to education in new technologies, in particular, should be taken into account in processes aimed at achieving gender equality.

Reduction of Gender Inequality in Political Participation

As in all countries in transition, the participation of women in politics in Serbia is very low and impeded by various obstacles. By and large, it is related to the very nature of the political life, plagued by an exceptionally confrontational political environment and characterized by the existence of the so-called "old boys' clubs"⁷¹ that exclude women, successfully and consistently, from informal groups that maintain negative women stereotypes and prejudices, intensified, in particular, by the re-traditionalization and re-patriarchalization of Serbian society in the '90s and the general criminalization of politics and the inherent high risk. Particularly worrisome is the fact that participation of women in Parliament has even diminished since 2002 (from 12.4 per cent to 10.8 per cent. There are very few women Ministers (11.8 percent in 2002)⁷². As a rule, the higher the level of decision-making, the greater is the exclusion of women from politics; if they do assume an important position, they have an altogether different public treatment from male politicians. In 2002, women accounted for 30.3 per cent of government officials and 28.1 per cent of local government officials⁷³, while they accounted for only 11 per cent of (highly prestigious) officials representing the country abroad⁷⁴.

The Law on local elections quota (2002) contributed to the increase of women's representation at the local level. Nevertheless, appropriate legal solutions (quotas) are needed in order to increase women's participation at all levels of political decision-making, as well as, and more importantly, determination of political parties to include women in participation not only by placing women on election lists, but also by electing them to political offices. Firm determination of political parties, along with extensive campaigns of non-governmental and international organizations and the interestedness of women in representing their own interests, as well as approximation to Europe which insists on the so-called gender mainstreaming⁷⁵ in all areas, especially in politics, will create a favourable environment for increasing political participation of women in the future

Strengthening the Role of Women in the Public Sphere

Although women in Serbia are markedly underrepresented at higher levels of political decision-making, women's organisations are very active in the non-governmental sector and women are in the majority in that sector⁷⁶. Women's NGOs, although numerous (there are about 100 such organizations), are faced with the problem of sustainability because of the changes in donors' policy and the lack of appropriate laws that would make it possible for them to be funded from the budget. Furthermore, in the wake of the deceleration of democratic changes, they face a growing apathy, as well as the problem of representation (Who do they represent?) and accountability (Who do they answer to?), which, objectively, reduces their influence in the public domain. Following the democratic changes, women's NGOs in Serbia have had ever better and ever more successful cooperation with institutions, especially in combating violence against women.

⁷¹ The term used to denominate male power groups emerging on the basis of belonging to exclusive clubs, closed for women.

⁷² *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p. 48.

⁷³ *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005, p. 48.

⁷⁴ Information obtained from Zorana Šijački from the Gender Equality Council, Government of the Republic of Serbia.

⁷⁵ Gender mainstreaming means a systematic inclusion of specific differences and needs of men and women in every development policy (genderization of policies and measures), aimed at promoting gender equality.

⁷⁶ M. Blagojević (ed.): *Towards a Visible Women's History: Women's Movement in Belgrade in the '90s*, Centre of Women's Studies, Research and Communication, Belgrade; A. Milić, *Women's Movement at the Crossroads of the Millennia: A Report on Empirical Research in Serbia and Montenegro*, Institute for Sociological Research of the Faculty of Philosophy in Belgrade, Belgrade, 2002.

In Serbia's public life, women occupy many prominent positions, including those at the university, in cultural institutions, the judiciary, health etc. However, they are often discriminated against in a more or less hidden way and fall prey to overt misogyny or stereotype-mongering in the media. Empowerment of women is seriously hampered by gender blindness even among women.

Women will play an ever more important role at Serbia's public scene, but in order to ensure that their increased participation brings about a qualitative transformation of the patriarchal values that are deeply-rooted in Serbian society⁷⁷, it is necessary that they themselves undergo the process of awareness-raising and individual empowerment. This is also true of the male population. Re-patriarchalization and re-traditionalization of Serbian society present great obstacles to women's equality and to the modernization of Serbia as a whole also in the future.

Reduction of Violence against Women and Children

In the general climate of the criminalization of Serbian society, different forms of violence against women and children, as well as against the elderly, are in the ascendant and inter-related. Domestic violence is on the rise – nearly every second woman in Serbia experiences some form of psychological violence (46.1 per cent) and every third (30.6 per cent) experiences physical family violence⁷⁸. Speaking of the frequency of child abuse, a recent survey of children in Sandžak has shown that every child has been a victim of child abuse at least once, that at least 50 per cent of children experience some sort of abuse and that 10 per cent experience severe forms of physical and sexual abuse. Patriarchal upbringing and traditional gender roles are major risk-factors of abuse which put girls at greater risk of abuse in home and in society in general⁷⁹. Women and child trafficking is on the rise, particularly due to the wars and the presence of soldiers⁸⁰; cultural violence against women is increasing (the media, stereotypes of, and prejudice against, women aimed at undermining their dignity and treating them as commodity); sexual molestation at workplace is in the ascendant. Women suffer ever longer ever more brutal forms of violence and, through the force of circumstances, primarily because of poverty, remain within the circle of violence⁸¹. Children represent a particularly vulnerable group. In general, thanks to the work of NGOs (the first hotline was established in 1990), the visibility of violence has increased. The Criminal Law of the Republic of Serbia (2002) treats family violence as a criminal offence (Art. 118a), while the new Family Law (2005) treats violence against women as a social, and not as a personal problem of the woman and provides for measures to protect family members against the abuser.

As a result of the increased visibility of violence, but also because of negative tendencies related to the causes of violence, an increase of indicators of violence against women may be expected. Violence visibility is achieved thanks to NGO campaigns and the adoption of appropriate laws. Yet, not even favourable legal solutions can have a quick positive effect considering that negative trends in mass culture, bad economic situation and the global and local rise of crime and violence facilitate the general rise of violence, including violence against women. The government and society will therefore have to take very serious and comprehensive measures in the coming period, aimed at preventing violence and at organizing professional support to victims of violence.

⁷⁷ For the problem of socialization of girls, primary school students, in Belgrade and the pressures they are exposed to in order to fit in the traditional role assigned to them in the restored Serbian traditional culture, see M. Malešević, *Primary and Secondary School Final Examinations, On Growing Up of Girls, Primary School Students, in Belgrade*; M. Blagojević, *Mapping Misogyny in Serbia, Discourses and Practice*, Vol. 2, AŽIN, Belgrade, 2005.

⁷⁸ V. Nikolić-Ristanović (ed.), *Family Violence in Serbia*, The Victimological Society of Serbia, Belgrade, 2002.

⁷⁹ S. Koso, *Children's Notions and Thoughts on Child Abuse*, Qualitative survey conducted in seven municipalities among children and youth aged 10-19 in Sandzak for UNICEF. It is interesting to note that children suffer psychological violence more deeply than physical violence. The data of the Incest Trauma Centre in Belgrade show that in 2003 in 72 per cent of cases the victims of sexual violence were persons of female sex, while offenders in 96 per cent of cases were men. (Source: Internal material of the Incest Trauma Centre).

⁸⁰ M. Blagojević, *The Position of Women in the Balkan Countries, A Comparative Review*, Banjaluka, Sarajevo: Gender Centre of the Republic of Srpska and the Gender Centre of the Federation of Bosnia and Herzegovina, 2004, Chapter 2.

⁸¹ This information has been obtained from the Autonomous Women's Centre in Belgrade

RECOMMENDATIONS

- Adoption of a National Plan of Actions for gender equality and a Gender Equality Law and their implementation by setting appropriate institutional, financial and professional preconditions;
- Strengthening of institutional mechanisms for achieving gender equality and gender mainstreaming at all levels;
- Harmonization of special laws with European standards, including gender mainstreaming;
- Adoption of a gender sensitive budget;
- Introduction of gender sensitive statistics⁸² into all spheres of public life and at all levels;
- Further professionalization of the non-governmental sector and the strengthening of cooperation between institutions and NGOs;
- Establishment of the knowledge base for gender policies, based on science research and gender sensitive statistics⁸³;
- Creating of the critical mass of scientists and experts in the field of gender studies (including men's studies) and further institutionalization of gender research and gender studies;
- Mainstreaming of knowledge from the field of gender studies into the regular education system and additional training of various professionals;
- Monitoring of the implementation of gender mainstreaming, including political and economic participation, as well as media representation and „hate speech“ against women;
- Formulation and the implementation of the National Plan of Actions against violence in everyday life and keeping statistics on victims of violence;
- Sensitization of the public in respect of questions of gender equality through campaigns, media promotions and education; and
- Realization of specific programmes intended for social integration of marginal groups in their entirety, as well as separate parts of those groups, depending on gender and age and related different needs.

⁸² Collection and processing of data according to gender.

⁸³ Collection and processing of data according to gender.

Goal 4. Reduce child mortality

Target 5. Reduce by two thirds, between 1990 and 2015, the under-five mortality rate Indicators

13. Under-five mortality rate (UNICEF-WHO)

14. Infant mortality rate (UNICEF-WHO)

15. Proportion of 1 year-old children immunized against measles (UNICEF-WHO)

SUMMARY

Over the past twenty years, child mortality in Serbia has decreased nationally. However, children and young people, accounting for 24.2 per cent of the total population, are very vulnerable groups particularly at risk, such as Roma, the poor and refugees. In respect of MDGs, special achievements in the public health sector in Serbia include eradication of poliomyelitis, elimination of diphtheria and reduction of some contagious diseases to individual cases (neonatal tetanus, whooping cough). Infant and child mortality have been largely due to hereditary and congenital conditions, while among school children and adolescents the predominant causes of illness and fatalities are addiction, reproduction disorders and accidents.

Specific targets for Serbia by 2015:

1. Promote the information system monitoring health attitudes and differences in child health by gender, permanent residence, social status, financial standing and belonging to particularly vulnerable groups (Roma, poor, refugees);
2. Continue to implement the effective strategy adopted to reduce child mortality from preventable diseases through prevention among particularly vulnerable groups (support to immunizations of these groups);
3. Focus prevention on new risk lifestyles and child conditions (prevention of injuries, prevention of risk lifestyles);
4. Develop improved peri-natal protection and primary healthcare for mother and child;
5. Develop, implement, monitor and evaluate the sectoral strategies aimed at reducing differences as to health and improving access of child population to primary healthcare

THE STATE OF THE ART AND TRENDS

Mortality of the under fives and infant mortality are sensitive indicators of the health status in Serbia. The likelihood of deaths in the under-five category steadily declined between 1990 and 2002 (from 18.3 to 11.5 per 1,000 livebirths in 2002). In the last ten years, the average decrease of child mortality in that age group was greater in central Serbia than in Vojvodina (Figure 1). At the same time, mortality due to injuries, poisoning, and exposure to external factors was on the increase. Health of the vulnerable population of children, such as Roma, refugees or underprivileged children is not monitored separately. Some researches indicate that there are more health-threatening risks among them and, individually, they have less access to health care.⁸⁴ Thus, according to the UNICEF research on multiple health status indicators conducted in 2000, the malnutrition (moderate and severe, as measured by the waste of the body mass for height) was nearly two times greater in the children from the refugee and internally displaced families than in the average population of children under five, and growth retardation (moderate and severe) was present more than three times.⁸⁵ Having that in mind, according to UNHCR data, the largest proportion of refugees and persons internally displaced throughout Europe lived in the Republic of Serbia (RS) in 2004 (total 482,895 or, on average, approximately 3 per cent of the local population)⁸⁶, it should be stressed that the children from vulnerable population groups have equal access to, and equally utilize health

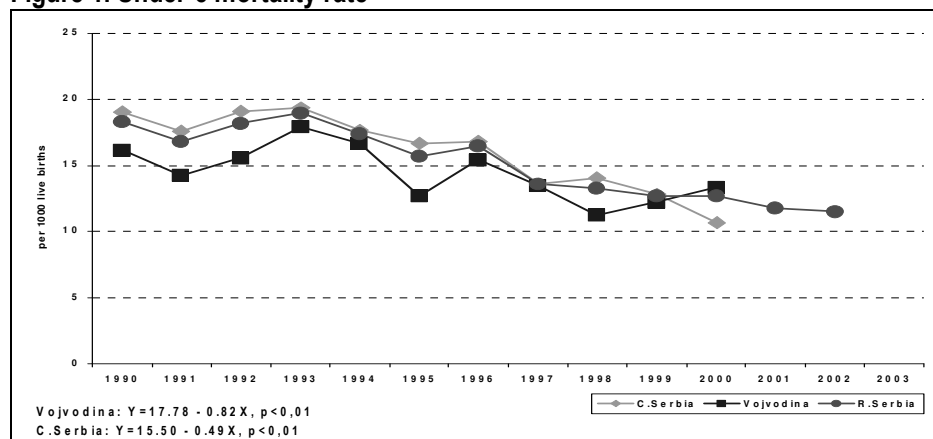
⁸⁴ ERRC, UN OHCHR. Memorandum: Protection of Roma Rights in Serbia and Montenegro. Belgrade: European Roma Rights Centre and Office of the United Nations High Commissioner for Human Rights, Mission in Serbia and Montenegro 2003.

⁸⁵ UNICEF. The National Report on Realization of the Goals from the World Summit for Children. The Federal Republic of Yugoslavia. Belgrade: UNICEF Belgrade Office 2001. p.33.

⁸⁶ UNHCR. Serbia and Montenegro: Development Through Local Integration. Review of Local Integration Programme and Appraisal of the Opportunities for Local Integration in Development Planning Instruments. Geneva: UNHCR Headquarters and UNHCR Offices in Serbia and Montenegro 2004.

services as the local population. However, the researches on accessibility and utilization of health facilities by the underprivileged children failed to show the satisfactory results.⁸⁷

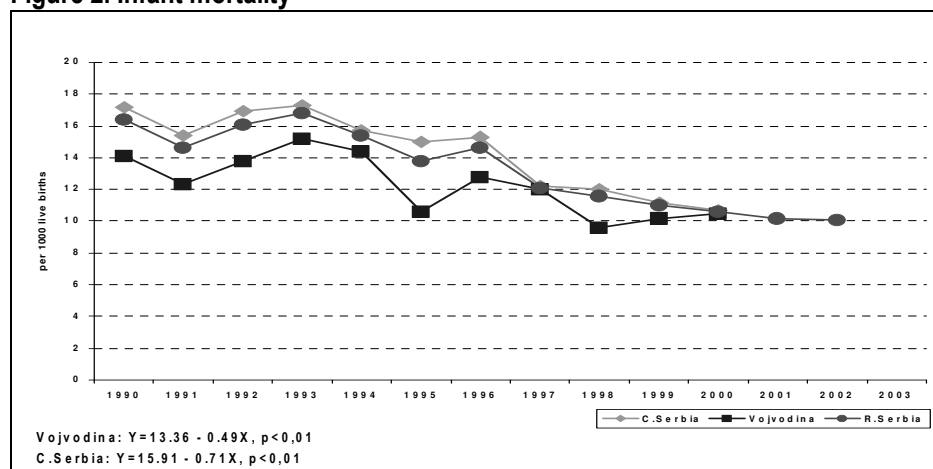
Figure 1. Under-5 mortality rate



Reduction of the under-five mortality rate by two-thirds, between 1990 and 2015, is a reachable target at the national level in the Republic of Serbia, taking into account the investment in health improvement of child population through an array of activities within the health care system, and within the other systems, including the NGOs.

Health is very sensitive in the first year of child's life. After a steady drop in the 1970s and the 1980s, the value of the infant mortality indicator in Serbia rose in the 1990s (1993 and 1996), and continued to fall again to reach that of 10.1 infant deaths per 1000 livebirths in 2002 (Figure 2).

Figure 2. Infant mortality



Despite the fact that, as from 1990, the infant mortality rate was reduced by 6 infant deaths per 1000 livebirths, it is still twice that in the EU countries⁸⁸, with existing area variations as to the steepness of the fall (by 7 in central Serbia, and by 5 in Vojvodina). These variations are particularly noticeable when observing the district areas. Infant deaths most commonly occur during the perinatal period, the primary causes being respiratory distress and congenital defects, viz. all preventable conditions through the use of general and specific prevention measures. Though somewhat more slowly, the perinatal mortality also declined over the last few years (from 14.7 per 1,000 livebirths in 1990, to 11.2 in 2002). The share of liveborn babies weighing less than 2,500g is being maintained on the national average level (5.3 per cent in 1995 and 5.4 per cent in 2002). However, no area variations in respect of this indicator have been noticed, the same as with the particularly vulnerable groups. A mechanism for routinely monitoring the low weight at birth has not yet been developed either at the municipal level or for the vulnerable groups. Low birth weight is in 15th place among the total burden of diseases in Serbia,

⁸⁷ UNICEF. The Many Faces of Poverty. Research on Child Poverty in Serbia. Belgrade: UNICEF Belgrade 2004.

⁸⁸ Lj. Kragelj-Zaletel, D. Bardehle G. Burazeri, D. Donev, U. Laaser, Minimum Health Indicator Set for PH-SEE Countries. Bielefeld: Programmes for Training and Research in Public Health 2003.

highlighting the fact that this condition is among the leading causes of chronic disability, but not of fatalities.⁸⁹ In the light of infant health care, of special importance are activities within the baby-friendly support programme of breast-feeding, which was introduced as early as 1995, upon the initiatives by UNICEF, the World Health Organization and the Yugoslav Committee for Breast-Feeding Support. Nevertheless, the proportion of infants aged 0-3 months who are breast-fed only is still low in Serbia, accounting for only 9.7 per cent in 2000.⁹⁰

To reduce the mortality rate among children under five by 2015, is a realistic MDG target that can be met, in the first place, owing to the measures of prenatal care. The strategy and the action plan developed within the reform of the health system (with the adopted health policy and vision of a health care system) specifically address such measures.⁹¹ However, in order to produce larger effects of all planned activities, it will be important to adopt a national strategy on prenatal and perinatal care.

Within MDG 4, it is also recommended to monitor immunization against measles. Immunization jabs against this and other vaccine-preventable diseases (diphtheria, tetanus, whooping cough) is sustained at above 95 per cent on average in Serbia (in 2003: 96 per cent against morbilli, and 97.8 per cent against diphtheria, tetanus, and whooping cough). However, the data on vulnerable groups are not available (poor, and Roma people), and there have also been some variations over the years indicating the lack of adequate PHC activities. Although at the national level, the coverage with vaccines is high, according to the data available from UNICEF and the RS Institute of Public Health, there are significant regional variations ranging between 70 per cent and 100 per cent. The same information indicates that more than 42,000 children have not been immunized (primarily among the Roma and internally displaced children). This is an evident indicator that, in practice, the planned effects of the total immunization coverage and the PHC system services are not equally accessible to all those in need. By 2015, the registration and coverage of immunized children are expected to improve, especially among the Roma.

Health of children is an invariable priority in Serbia. The basic activities within the health care system have already been defined in the Programme of Health Care for Women, Children, School Children and Students⁹², and are in particular singled out in the current strategic documents for health system reform, as follows⁹³:

- Project »Strengthening Maternal and Child Health Services«,
- Project »An Integrated Early Development«,
- Project »Nutrition« with the Prevention Programme of Iodine Deficiency Disorders, Monitoring Growth and Development of Children, and Preparation of the National Action Plan for Preventing Iron Deficiency Anaemia.

The project of strengthening maternal and child health services is focused on permanent education and training of PHC practitioners, further development of baby-friendly hospitals, an integrated development of polyvalent health visitors, urgent care paediatrics, and development of preventive practice guidelines. Child health improvement is also supported in the draft national strategy and action plan for tobacco control raising public awareness about the need to improve child health.

However, the routine analyses have shown that the real support for the implementation of the activities at the municipal level is still lacking.⁹⁴

RECOMMENDATIONS

To monitor the achievement of Goal 4 among the vulnerable groups (poor people, Roma, refugees, handicapped children) it is necessary to introduce continuous target researches. On the whole, it is made necessary to promote the routine health statistics in terms of quality data assurance, as well as the data which allow disaggregation by gender, socio-economic status, and permanent place of residence.

Further improvements in attaining MDG 4 are possible if the strategies which have proved to be effective in reducing child mortality from preventable diseases through the use of current measures (e.g., routine immunization support system) continue to be applied, or through comprehensive three-level intervention: health policy and strategy, health service delivery, and community levels. Special emphasis is placed on the need to

⁸⁹ Z. Atanasković-Marković, V. Bjegović, S. Janković S, et al. Burden of the Diseases and Injuries in Serbia. Belgrade: The Republic of Serbia Ministry of Health 2003.

⁹⁰ UNICEF. The National Report on Realization of the Goals from the World Summit for Children. The Federal Republic of Yugoslavia. Belgrade: UNICEF Belgrade Office 2001.

⁹¹ The Republic of Serbia Ministry of Health (S. Simić, A. Šaulić, J. Grozdanov, V. Bjegović, D. Atanasijević), Better Health for All in the Third Millennium, Belgrade: The Republic of Serbia Ministry of Health 2003.

⁹² Decree on Health Care for Women, Children, School Children and Students. RS Official Gazette 49/95.

⁹³ The Republic of Serbia Ministry of Health (S. Simić, A. Šaulić, J. Grozdanov, V. Bjegović, D. Atanasijević), Better Health for All in the Third Millennium. Belgrade, The Republic of Serbia Ministry of Health 2003.

⁹⁴ V. Babić, Lj. Sokal-Jovanović, D. Matijević, et al., Programme of Health Care for Women, Children, School Children and Students in CPHI, Programme-Based Health Care. Belgrade, City Public Health Institute, 1998.

define, implement, monitor and evaluate specific strategies for new disease patterns in child population (Strategy for Prevention of Injuries, National Perinatal Strategy, Social Mobilization of Marginalized Groups).

Goal 5. Improve maternal health

Target 6. Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Indicators

16. Maternal mortality ratio (UNICEF-WHO)

17. Proportion of births attended by skilled health personnel (UNICEF-WHO)

SUMMARY

Health care for women aged 15 years and over (accounting for 42.5 per cent of the total population) is targeting all the stages in the development of a woman: childhood and teenage periods and adolescence, generative and post-generative periods. Despite the problems related to the collection and reliability of information, and consequently its interpretation, maternal health is mainly characterized by an overall fertility rate which is below the level ensuring simple reproduction, a reduced proportion of abortions (induced termination of pregnancy) due to fewer such procedures performed in public health institutions and to the lack of their registration in private practices, and by the predominance of genitourinary conditions including sexually communicable diseases (thanks also to improved diagnosing and

registration), followed by neoplasms and endocrine disorders.

The specific targets for Serbia to be reached by 2015:

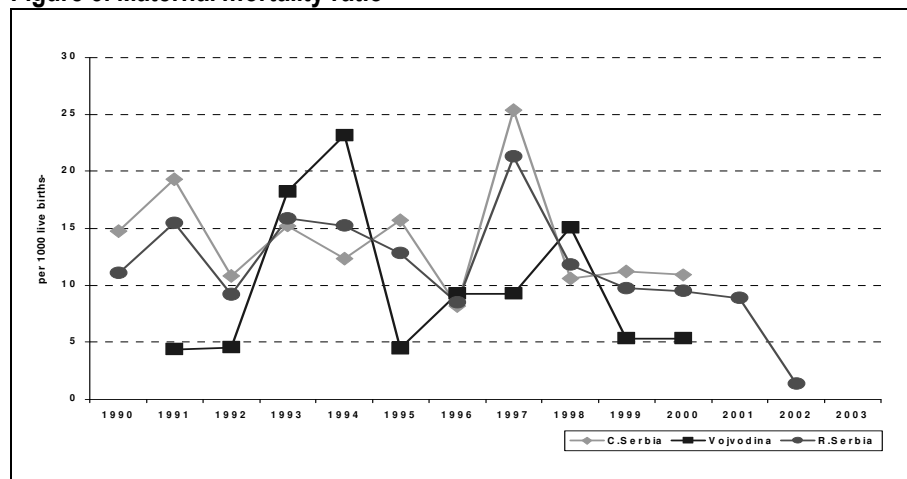
1. Improve the information system registering and monitoring all aspects of maternal health by social status, financial standing and belonging to particularly vulnerable groups (Roma, poor, refugees);
2. Reduce maternal health variations depending on social status, financial standing and belonging to vulnerable groups;
3. Improve coverage of women in child-bearing years by primary health care and family planning counselling;
4. Develop maternal health programmes in cooperation with NGOs, especially for youth and vulnerable groups that will be community-based and helping reduce the proportion of induced abortions and increase condom use;
5. Improve efficiency and quality of maternal health both in the public and private sectors, especially early detection programmes.

THE STATE OF THE ART AND TRENDS

In the past decade, the maternal mortality ratio (number of women deaths due to complications during pregnancy, childbirth and lying-in per 100,000 livebirths) tends to vary greatly from one year to the next as there is very little likelihood that this event will occur (e.g., the indicator which was 9.5 in 2000, was only 1.3 per 100,000 live births in 2002) (Figure 3).

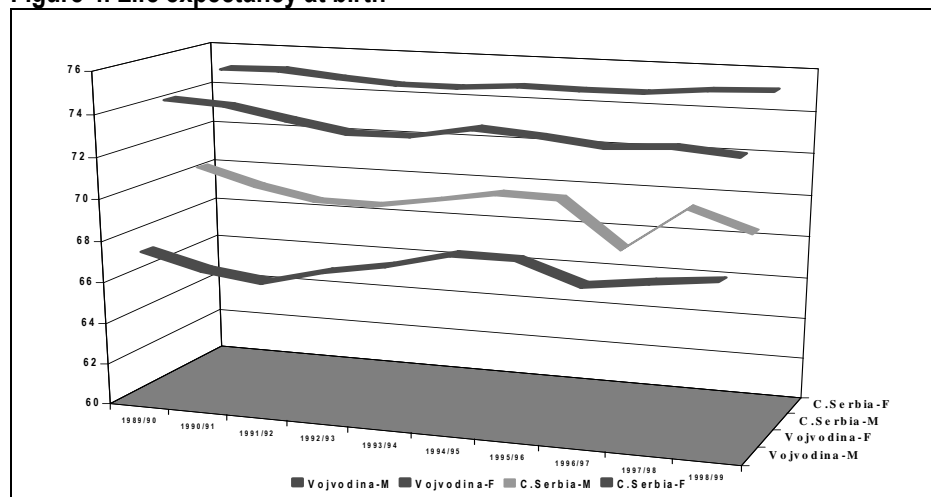
When the five-year average in the initial time interval (1990-1994), as specified for the millennium monitoring of maternal health, is compared with the five-year average based on the most recently available data (1998-2002), it can be seen that the maternal mortality ratio has significantly dropped from 13.88 to 8.24. The three-year average shows even a greater improvement (6.57 per 100,000 live births).

Figure 3. Maternal mortality ratio



Life expectancy is one of the primary indicators in the light of European integration processes (Laeken indicators). For women in Serbia, this indicator stagnated over the last decade, and its increase was slower than among the male population, with perceptible area variations (Figure 4)⁹⁵, and as compared to EU average, it was five years lower.⁹⁶

Figure 4. Life expectancy at birth



Non-fatal health conditions pose a greater burden for the female population in terms of years of life lost (20 per cent for males and 25 per cent for females), indicating that there is a need to promote both preventive procedures and health services for this population.⁹⁷ In 2000, research into population health in Serbia⁹⁸ and into multiple indicators of the health status and behaviour of women and children⁹⁹ indicated that the proportion of women of childbearing age who regularly see a gynaecologist is low, accounting for only 39.2 per cent. The leading

⁹⁵ S.Simić, V.Bjegović, J. Erić-Marinković, Health Status of the Population in the Republic of Serbia during the Last Decade of the 20th Century in S. Simić, V. Bjegović, P. Jelača, et al., The Bases of Health System Reform in the Republic of Serbia, Belgrade, Centre for Alternatives Study, Samizdat B92 2001, pp.47-65.

⁹⁶ Kragelj- Lj. Zaletel, D.Bardehle, G. Burazeri, D. Donev, U.Laaser, Minimum Health Indicator Set for PH-SEE Countries, Bielefeld, Programmes for Training and Research in Public Health, 2003.

⁹⁷ Z. Atanasković- Marković, V. Bjegović, S. Janković, et al., Burden of the Diseases and Injuries in Serbia, Belgrade, The Republic of Serbia Ministry of Health, 2003.

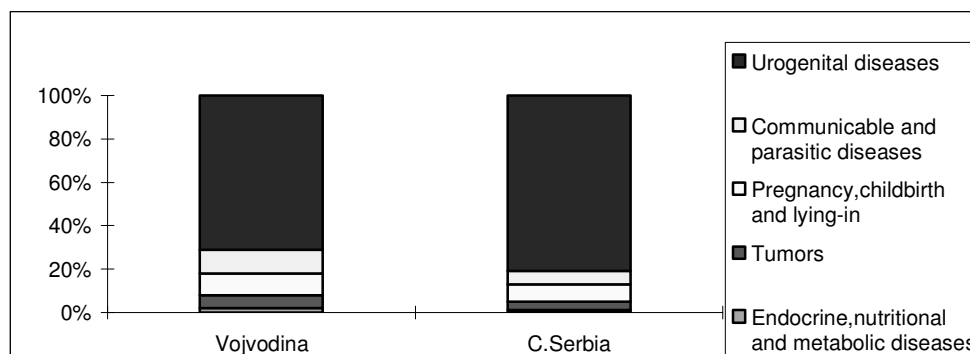
⁹⁸ Institute of Public Health of Serbia, WHO, 2000 Population Health Survey in Serbia, Belgrade, Institute of Public Health of Serbia and WHO, 2000.

⁹⁹ UNICEF, Research into the multiple indicators of the health status and behaviour of women and children. Belgrade, UNICEF Belgrade Office, 2001.

groups of diseases in the public-health service for women are the preventable ones (urogenital diseases, followed by communicable and parasitic diseases) (Figure 5).

The prevalence of condom use among women in the generative period is markedly low in their irregular sexual intercourses, but with a tendency to increase (44 per cent in 1997, and 52 per cent in 2000).¹⁰⁰ Likewise, researches done among the young indicate that the rates of abortion (voluntary termination of pregnancy) are high. The evidence-based researches show that 40 per cent of young women were pregnant at least once, of whom 20 per cent had one or more abortions, and only 40 per cent had never visited a gynaecologist.¹⁰¹

Figure 5. Leading groups of diseases in the public-health service for women



By 2015, a further decline in the maternal mortality ratio is expected, with an increasing proportion of births attended by skilled health personnel, including the mechanisms for monitoring the vulnerable populations (the poor and Roma populations).

RECOMMENDATIONS

The activities planned within health protection of women require more investment in the phase of their implementation. It is of particular importance to focus attention on the coverage of women in the generative period with regular health protection at PHC level. This applies to the population in general, and even more so to the Roma, poor and other vulnerable population groups. Various projects are now underway, which are expected to result in the promotion of efficiency and performance quality of the services for reproductive health (WHO and the French Government project aimed at the development of cervical cancer screening, with a pilot-study area in the District of Branicevo; and also the project by the European Agency for Reconstruction dealing with preventive practices, which is focused on the prevention and screening of health disorders). The Ministry of Health (MoH) strategy »Better Health for All in the Third Millennium« also focuses on the programmes of reproductive health for youth.¹⁰²

Goal 6. Combat HIV/AIDS, malaria and other diseases

Target 7. Have halted by 2015 and begun to reverse the spread of HIV/AIDS

Indicators

18. HIV prevalence among pregnant women aged 15-24 years (UNAIDS-WHO-UNICEF)

19. Condom use rate of the contraceptive prevalence rate (UN Population Division)

19a. Condom use at last high-risk sex (UNICEF-WHO)

19b. Percentage of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS (UNICEF-WHO)

19c. Contraceptive prevalence rate (UN Population Division)

20. Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years (UNICEF-UNAIDS-WHO)

¹⁰⁰ B. Cucić, V. Bjegović, D. Buković, Monitoring AIDS Preventive Indicators, First Evaluation, Belgrade, Institute of Social Medicine, Statistics and Health Research, Medical School, Belgrade University and UNICEF, 2000.

¹⁰¹ UNICEF. Brave New Generation, Young People in the Federal Republic of Yugoslavia, Facts and Recommendations, Belgrade: UNICEF Belgrade Office, 2002.

¹⁰² The Republic of Serbia Ministry of Health (S. Simić, A. Šaulić, J. Grozdanov, V. Bjegović, D. Atanasijević), Better Health for All in the Third Millennium, Belgrade, The Republic of Serbia Ministry of Health, 2003.

Target 8. Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Indicators

21. Prevalence and death rates associated with malaria (WHO)
22. Proportion of population in malaria-risk areas using effective malaria prevention and treatment measures (UNICEF-WHO)
23. Prevalence and death rates associated with tuberculosis (WHO)
24. Proportion of tuberculosis cases detected and cured under DOTS (internationally recommended TB control strategy) (WHO)

SUMMARY

Fighting these diseases must clearly be focused on combating HIV/AIDS, tuberculosis and chronic widespread non-communicable diseases, bearing in mind a very low prevalence of malaria which is reduced exclusively to "imported" cases.

Specific target for Serbia by 2015:

1. Improve monitoring of risk sex and HIV/AIDS epidemiological picture;
2. Improve knowledge of importance and practice of voluntary testing for HIV and other sexually communicable diseases, especially among pregnant women and particularly vulnerable groups;
3. Continue effective community-based action in cooperation with NGOs aimed at HIV/AIDS prevention and step up these activities among youth and particularly vulnerable groups with developed patterns of risk behaviour;
4. Improve efficiency and quality of health care, including support of society to persons living with HIV/AIDS;
5. Reduce and eliminate all forms of discrimination against HIV/AIDS people;
6. Improve registration and monitoring of disparity as to incidence and prevalence of tuberculosis based on social status and financial standing, and in particular with respect to specially vulnerable groups (Roma, poor, refugees);
7. Improve proportion of TB cases detected and cured by using the DOTS methodology;
8. Organize prevention of chronic widespread non-communicable diseases, especially cardiovascular conditions, cancerous tumours and injuries.

THE STATE OF THE ART AND TRENDS

Judging by the combined number of registered AIDS cases and AIDS attributable deaths, Serbia still ranks among the low prevalence countries. Nevertheless, the number of newly infected and new HIV cases is steadily increasing. The studies dealing with HIV prevalence among pregnant women, condom use rate and ratio of HIV/AIDS orphans (as recommended MDG indicators) have not yet been treated as routine health statistics.

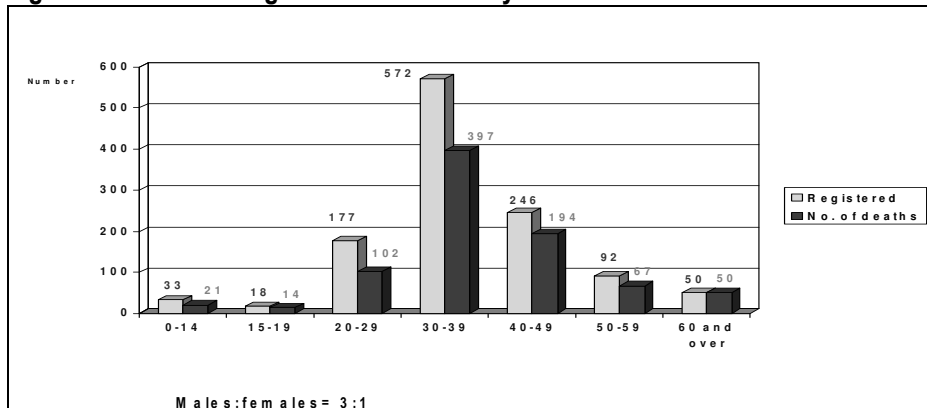
The current estimates suggest that the magnitude of all HIV/AIDS-related problems is at least 6-11 times higher than the recorded one as a result of an extremely low rate of voluntary responses (2.7 per 1,000 inhabitants). In the period from 1985 to 2002, there were 1,702 recorded HIV infections in Serbia; of these cases 1,126 developed into a full-blown disease, and 830 resulted in death from AIDS (Figure 6). Based on the cases reported to the RS Institute of Public Health, there were 57 new AIDS cases in Serbia in 2004, so that the total number of AIDS sufferers from the onset of the epidemic to and including 2004 is 1,245 (905 males and 340 females).¹⁰³

With the introduction of a highly active anti-retroviral therapy (HAART) in 1997, the number of AIDS deaths was substantially reduced, and the period of symptomless HIV infection prolonged. But a much more

¹⁰³ See annexed table containing indicator values.

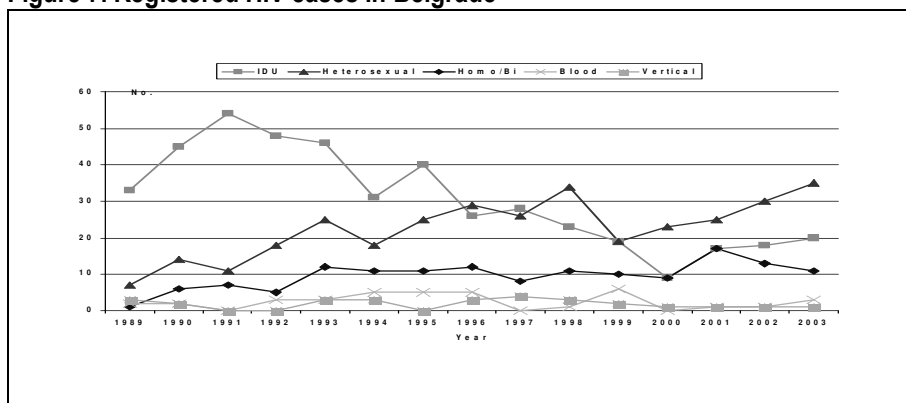
sensitive and realistic indicator of the epidemiological HIV/AIDS status is analysis of the new HIV cases as compared to AIDS cases.

Figure 6. Number of registered and mortality cases of AIDS



The gender infection ratio increasingly changes indicating the growing risks among the female population (over the last three years the male-to-female ratio among the sufferers was 3 to 1; while at the outbreak of the epidemic in Serbia, it was approximately 5 to 1). This gender ratio indicates a changed epidemiological situation: there is an increasing number of infected women and, consequently, a potential for transmission of HIV infection from the mother to the child will be on the rise, unless adequate preventive measures have urgently been put in place. When looking at how HIV infection is distributed among age groups, one observes that the largest proportion of cases continues to be in the 30-49 age group (39 cases or 60 per cent), but also that there has been a rise in the group aged 20-24 years, as compared to some earlier periods, mostly among young homosexuals/bisexuals. The largest proportion of HIV cases was recorded in Belgrade (Figure 7).

Figure 7. Registered HIV cases in Belgrade



It is highly important to organize monitoring of AIDS parallel with the monitoring of other sexually transmitted infections (STI) for which the increasing incidence rates were reported in the last two years, and which are supportive of the risk behaviour (Table 1).

Table 1. STI rate in Serbia: incidence (100,000)

Disease		1999	2000	2001	2002	2003
Syphilis	Number	77	75	217	78	77
	Rate	0.98	0.96	2.77	0.98	1.03
Gonorrhoea	Number	235	247	234	153	112
	Rate	2.40	3.16	2.94	2.04	1.49
AIDS	Number	59	80	80	77	62
	Rate	0.76	1.06	1.06	1.02	0.83
Chlamydia infections	Number	1081	67	40	757	1163
	Rate	13.8	0.86	0.51	10.10	15.51
Gen. herpes virus infections	Number	5	9	5	20	63
	Rate	0.06	0.11	0.06	0.27	0.84
Total	Number	1458	468	559	1104	1472
	Rate	14.9	5.98	7.14	14.72	19.63

Risk behaviour is conducive to further transmission of HIV infection, and sex without adequate protection is twice more prevalent among adults than among the young (unprotected sex – adults: 66.4 per cent, sex without condom use – young people: 32.5 per cent).¹⁰⁴

With regard to transmission categories, as many as two-thirds of HIV infections reported in 2003 were due to unsafe sex (25 cases or 38.5 per cent through heterosexual relations, and 19 cases or 29 per cent through homo/bisexual relations), which was apparently the trend of the last five years. At the same time, the trend towards a decreasing transmission among IV drug abusers through sharing of contaminated syringes, needles and paraphernalia is still present (1/5 of all cases). There is only one registered case of HIV transmission from mother to child, and another case of infection through blood transfusion and/or blood products; 7 HIV testing positive cases (11 per cent) have no precise mode of transmission detected. According to current estimates regarding HIV transmission from mother to child, the expected minimum of HIV infected pregnant women is 20, and the maximum number is 64 (with fertility rate of 37.92 per 1,000).¹⁰⁵ Other researches show that the level of knowledge is unsatisfactory both in terms of the lack of full familiarity with preventive practices and taking an opportunity to check the HIV status through voluntary testing.¹⁰⁶ The situation is particularly worrying based on the evidence gathered through research on the vulnerable young population groups (IV drug users, young sex traders and those practising sex with partners of the their own sex).¹⁰⁷ Results of a rapidly made estimate of the state of affairs as regards, and a response to, HIV/AIDS among particularly vulnerable young population groups in Serbia indicate that drugs are frequently used; that soft drugs are relatively easy to come by; that sharing of drug injecting equipment is common among IV drug users, which is conducive to the spread of HIV infection. Among the vulnerable groups of young people, a small number regularly use condoms and normally have sex in a drug-induced state, which significantly increases the risk (e.g., among IV drug users only 17 per cent regularly use condoms, and even 90.7 per cent have sex under the influence of substances, while among young sex traders, 60.3 per cent of them reported use of condoms, and with the average number of 193 sexual partners annually, even 98.5 per cent have sex under the influence of substances). According to the data available from the same research, the community-based programmes mainly target the general population, while minimum action is intended for vulnerable young people particularly at risk.

Of relevance for the assessment of the present situation with regard to HIV/AIDS are limitations as to surveillance and control of the disease, especially insofar as the persons living with HIV without manifest signs of the disease are concerned. The HIV-related stigma and discrimination may prevent the individuals with risk behaviours to check their HIV status and prevent school children from attending classes.

However, there was an organized response to HIV/AIDS-related problems even before the national strategy was adopted in early 2005. In particular, the resources allocated through GFTM served as a source of particular encouragement. Methods for the education of peers and initiatives taken by NGOs, though still insufficiently coordinated, have been successful.

¹⁰⁴ Public Health Institute of the Republic of Serbia, WHO, Survey of Population Health in Serbia 2000

¹⁰⁵ G17 Institute, UNICEF, HIV Transmission from Mother to Child, the Estimate of Cost-Effectiveness of the Prevention Programme, Belgrade, UNICEF Belgrade Office, 2004.

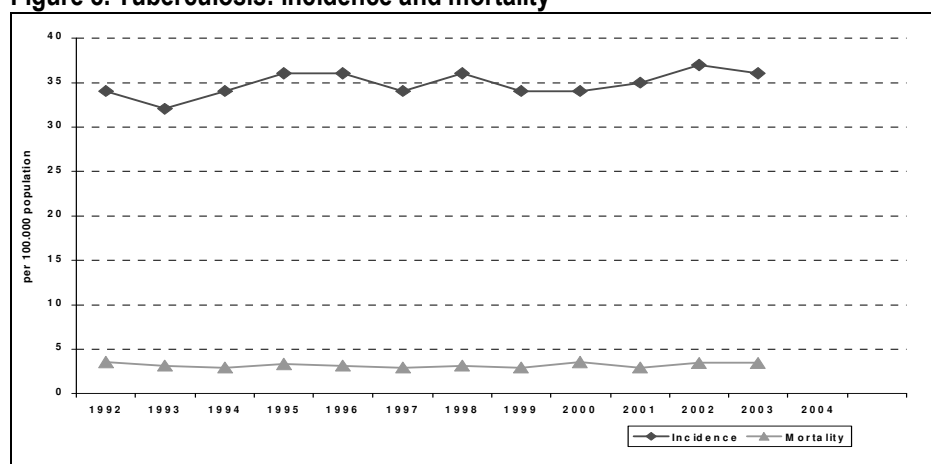
¹⁰⁶ B. Cucić, V. Bjegović, D. Buković, Monitoring AIDS Preventive Indicators, First Evaluation, Belgrade, Institute of Social Medicine, Statistics and Health Research, Medical School, Belgrade University and UNICEF, 2000.

¹⁰⁷ V. Cucić., A Quick Estimate and Response to HIV Infection among the Vulnerable Population of Youth, Belgrade, UNICEF, 2003.

Within the framework of MDG-6, monitoring is especially focused on tuberculosis. The burden of tuberculosis in Serbia increases with the ageing of the population. In the overall disease burden, tuberculosis ranks 16th. In most cases, the burden itself was created by the years of life lost, indicating that the health service activities are still underdeveloped.¹⁰⁸ As a result of the measures used for many years as protection against tuberculosis, there was a steady decline of tuberculosis cases, so that in 1990 its incidence in our country was 41/100,000 population. At that time, the average incidence rate in the Balkans was 45, and in Europe 27/100,000, which was markedly below the world average (155/100,000). In the early 1990s, the breakdown of the former Yugoslavia took place, with massive migration of the population from the war-torn areas of Croatia, and Bosnia and Herzegovina (BiH). The Republic of BiH had the highest tuberculosis incidence rate in SFRY, namely 81/100,000 population. The increasing unemployment, economic crisis and malnutrition of the population, coupled with constant stress and strain on people were the hallmarks of the period. In the spring of 1999, Serbia was bombed by NATO, and the bombing campaign lasted for more than two months. Over the last ten or so years, due to the wars waged in the region, migration of the population, international sanctions, and global impoverishment of the people and the health service alike, a progressive drop in tuberculosis cases in Serbia, as was the case in the previous decades, did not occur. The problems multiplied, such as discontinued treatment; insufficient and irregular supply of essential anti-tuberculosis drugs; lack of reagents for mycobacteriological diagnostic procedures; lack of x-ray films; no financial support for quality performance control, and many other limitation factors – all had their resultant consequences. The number of TB patients, stagnated for several years, is now showing a tendency towards growth.

Many ARD positive patients were reluctant to seek professional help because of a bad situation. An increased incidence of tuberculosis was registered already in 2000, and it continued to rise, so that in 2002 there were 100 more new registered cases than in 2001. The tuberculosis incidence rate in Serbia of 37/100,000 in 2002 is still a moderate incidence rate¹⁰⁹ (Figure 8).

Figure 8. Tuberculosis: incidence and mortality



The male-female ratio of less than 1 was found in all age groups, except among those under 24 years of age. Analysis of the incidence of tuberculosis in Serbia, by gender and age, shows that the majority of male and female sufferers are in the age group of over 70. The incidence of tuberculosis in Serbia varies from district to district. In central Serbia, TB incidence rate was the highest in the District of Macva (74/100,000), and then in the Districts of Toplica and Morava. Compared to an earlier period, there were no major changes in the ratio of pulmonary to extrapulmonary tuberculosis. For the last 10 years, respiratory and extrapulmonary TB have accounted for 94 per cent and 6 per cent, respectively, of all TB cases in Serbia. Of the organs affected by EPTB, the most common is specific lymphadenitis (49 per cent), urogenital TB (21 per cent), osteoarticular TB (11 per cent), and meningitis (2 per cent). Other localizations take 16 per cent. The pulmonary tuberculosis has been bacteriologically confirmed in about 60 per cent of the cases. In 84-89 per cent of the new cases annually, treatment has been successful. Treatment has failed in 3 per cent of the cases. Against the total number of new registered cases, the percentage of relapses, on average, is 8 per cent.

The analysis of effective TB control also benefits from the proportion of TB cases which are detected and treated following DOTS (as a recommended indicator for monitoring the attainment of MDGs). The available

¹⁰⁸ Z. Atanasković-Marković, V. Bjegović, S. Janković, et al., Burden of the Diseases and Injuries in Serbia, Belgrade, The Republic of Serbia Ministry of Health, 2003.

¹⁰⁹ The Republic Commission for Tuberculosis, Programme of Population Health Protection from Tuberculosis. Belgrade, The Republic of Serbia Ministry of Health, 2005.

data show that DOTS is very unfavourable for Serbia (30.5 per cent in 1999). According to the Programme of Population Health Protection from Tuberculosis, with full implementation of the DOTS strategy, the incidence of tuberculosis is expected to fall from the current 36 to 25/100,000 population.¹¹⁰ Prevalence of TB cases steadily decreased at the national level (from 69 per 100,000 in 1995, to 59 per 100,000 in 2002). However, it is realistic to expect that the prevalence of TB will be higher among the vulnerable groups (poor, Roma, elderly), and this can be found out only through individual evidence-based researches.¹¹¹

Finally, it should be borne in mind that the burden of chronic mass non-communicable diseases (cardiovascular and malignant diseases, injuries and poisoning) is an essential health problem of the population in Serbia, and its solution is among the priorities of the Millennium development. The same indicates that exposure to lifestyles associated with health risks (smoking, alcohol use, inadequate nutrition, lack of physical activity) is widespread, as well as the exposure to environmental factors at risk. Although there is no data compiled as routine health statistics on morbidity by social status and financial standing of the population, the survey of the standard of living has shown that among those living below the poverty line there are 30.3 per cent of those diagnosed with some chronic condition, as opposed to 26.6 per cent of those above the poverty line.¹¹² A considerably high percentage of the poor have identified mental health disorders as their major health problem.

RECOMMENDATIONS

Since HIV/AIDS is responsible for 1,742 DALYs in Serbia, and more than 50 per cent of this burden is caused by mortality¹¹³, this requires full implementation of the steps outlined in the National Strategy for Combating HIV/AIDS in Serbia, which was adopted in February 2005. The principal strategic elements of the Strategy are as follows¹¹⁴:

- Prevention of HIV/AIDS in the general population, among adolescents and particularly vulnerable population groups,
- Care, treatment and support to persons living with HIV/AIDS,
- Community support in combating HIV/AIDS, and
- Epidemiological surveillance of HIV/AIDS.

The HIV/AIDS National Strategy was developed in the process of wide consultations and with the participation of both the governmental bodies and health institutions, national NGOs and international organizations.

Based on the Law on Population Protection from Non-Communicable Diseases, a programme of immunization against tuberculosis was established in Serbia in 2004. This programme includes compulsory immunization with BCG vaccine at birth, and not later than when the child is one year-old. New legislation failed to include boosters. The RS MoH Commission for Tuberculosis prepared the National Programme for Tuberculosis in line with the WHO guidelines¹¹⁵ for effective control of tuberculosis in the country. The basic measures are designed to detect tuberculosis and treat the patients suffering from the disease. Effective treatment is particularly important for patients found to have the tubercle bacillus through direct microscopy in the sputum, as this bug has the highest potential for spreading further. Adequate treatment of tuberculosis in adults and children, with the use of standard therapeutic regimen, no matter whether the disease was bacteriologically confirmed or not, is a basis for all national tuberculosis programmes worldwide.

In addition to monitoring, prevention and control of chronic mass non-communicable diseases, in the light of European integration, it would be also important to monitor the primary Laeken indicator »Self-Perceived Health Status«, for which no relevant research data have been provided yet.

Goal 7. Ensure environmental sustainability

¹¹⁰ The Republic Commission for Tuberculosis. Programme of Population Health Protection from Tuberculosis, Belgrade, The Republic of Serbia Ministry of Health, 2005.

¹¹¹ Z. Atanasković-Marković, V. Bjegović, S. Janković, et al., Burden of the Diseases and Injuries in Serbia. Belgrade, The Republic of Serbia Ministry of Health, 2003.

¹¹² Poverty Reduction Strategy in Serbia. Belgrade, Republic of Serbia Government, 2003.

¹¹³ Z. Atanasković-Marković, V. Bjegović, S. Janković, et al., Burden of the Diseases and Injuries in Serbia. Belgrade, The Republic of Serbia Ministry of Health, 2003.

¹¹⁴ Commission for Combating HIV/AIDS, National Strategy for Combating HIV/AIDS in Serbia (2005-2010). Belgrade: Ministry of Health 2005.

¹¹⁵ The Republic Commission for Tuberculosis, Programme of Population Health Protection from Tuberculosis, Belgrade, The Republic of Serbia Ministry of Health, 2005.

Target 9. Integrate the principles of sustainable development into country policies and programmes; reverse the loss of environmental resources.

Indicators

- 25. Proportion of land area covered by forest (FAO)
- 26. Ratio of area protected to maintain biological diversity to surface area (UNEP-WCMC)
- 27. Energy use (kg oil equivalent) per \$1,000 GDP (PPP) (IEA, World Bank)
- 28. Carbon dioxide emissions per capita (UNFCCC,UNSD) and consumption of ozone-depleting CFCs (ODP tons) (UNEP-Ozone Secretariat)
- 29. Proportion of population using solid fuels (WHO)

Target 10. Reduce by half (halve by 2015) the proportion of people without sustainable access to safe drinking water and sanitation

Indicators

- 30. Proportion of population with sustainable access to an improved water source, urban and rural (UNICEF-WHO)
- 31. Proportion of population with access to improved sanitation, urban and rural (UNICEF-WHO)

Target 11. By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

Indicators

- 32. Proportion of households with access to secure tenure (UN-HABITAT).

SUMMARY

The field of the environment has an important place among the MDGs as the concept of sustainable development was based on the efforts aimed at environmental promotion at the global level and the fact that the state of the environment is linked in many ways with health and poverty.

The right to a healthy environment and the duty to protect and promote it have been established under the Constitution of the Republic of Serbia.¹¹⁷ Also, in late 2004 a set of new laws were adopted with a view to a rational utilization of natural resources and environmental protection. The legislation was also aimed at creating conditions for adjusting the pattern and dynamics of economic and other activity to the processes going on in the environment, this being an essential principle of sustainable development.¹¹⁸

In addition to the above-mentioned documents, there are many other relevant laws and international agreements governing this field.

The main targets for Serbia by 2015:

1. Increase proportion of land area covered by forests;
2. Increase ratio of areas protected to surface area;
3. Improve energy use efficiency;
4. Reduce use of solid fuels by households;
5. Increase proportion of population with sustainable access to safe drinking water;
6. Increase proportion of population with access to improved sanitation;
7. Increase proportion of population with access to secure tenure;
8. Put in place a safe waste management system.

¹¹⁷ Constitution of the Republic of Serbia, Articles 31 and 60.

¹¹⁸ Law on Environmental Protection, Law on Integrated Prevention and Control of Environmental Pollution, Law on Strategic Assessment of Environmental Effects, December 2004.

THE STATE OF THE ART AND TRENDS

In the 1980s, at the close of the last century, and prior to the breakdown of the former state, prior to wars, sanctions and, finally, the NATO aerial bombardment in 1999, the environment in Serbia was less deteriorated than in the majority of European countries. A significant indication of the state of environmental preservation in Serbia lies in the fact that its bio diversity was among the best in Europe. According to the relevant information, based on the number of species per unit surface area, in some locations Serbia ranked between the 4th and 8th place in Europe. However, during the last decade of the previous century, for all of the reasons mentioned above, the situation worsened considerably. The economic stagnation of the country and the reduced level of investment into environmental protection had a negative impact on environment management possibilities. The existing problems – such as pollution of air, water and soil, dumping of household and hazardous wastes and damage to forests and bio diversity, compounded further. Furthermore, increased poverty accounted for more use of firewood and illegal logging multiplied. On the one hand, the impoverished economy, because of the lack of funding for environmentally safe technologies, resulted in environmental degradation. On the other hand, the scaling down of industrial production and unavailability of funds for farming and the lack of fertilizers for the crops reduced the pressure on the environment.

Target 9. Integrate the principles of sustainable development into country policies and programmes; reverse the loss of environmental resources.

Indicator 25. Proportion of land area covered by forests

Of all land area covered by forests in Serbia, approximately 56 per cent is owned by the state, and the remaining 44 per cent is privately owned. In the 1990-2002 period the proportion of land area covered by forests remained at much the same level of about 25 per cent.

Proportion of forested area in Serbia¹¹⁹

Year		1990	1996	1999	2002
Area covered by forests	ha	1,920,537	1,985,819	1,984,658	1,931,416
	%	24.8	25.6	25.6	24.9

In the period from 1996 to 2001 there was a reduction of maintenance activities and reforestation which, combined with the same scale of logging and damage to forests, resulted in a stagnating proportion of land area covered by forests¹²⁰.

The current situation of forests in Serbia can be described as unsatisfactory, with insufficient production capacity, a negative age structure, inadequate overgrowth and forestation, unbalanced components, a high percentage of broken structural components and weeded surfaces, and poor health conditions. All this has had an adverse effect on both the quality and quantity of land areas covered by forests. Poor health of forests has been due primarily to growing pollution. Since 2003 the methodology employed by ICP Forests has been used to monitor the health of forests at more than 100 bio-indicator points.

The world average for forested areas is around 30 per cent, and around 40 per cent in the Europe and Central Asia (ECA) region (1990 - 2002).¹²¹

Indicator 26. Ratio of area protected to maintain biological diversity to surface area (UNEP-WCMC)

Five of the six types of biomes found in Europe can be found in the Republic of Serbia, which has a total surface area of 88,361 km², representing only about 0.06 per cent of the world's dry land or 1.8 per cent of the European continent. Protected areas include national parks: Kopaonik, Sar Planina, Fruska Gora, Gerdap and Tara; as well as numerous nature reserves (98), areas of exceptional natural beauty (7), natural beauty monuments (282), regional natural parks (7), monuments of landscaping (14), regions of exceptional natural

¹¹⁹ Republican Statistical Office and the Nature Conservation Institute of the Republic of Serbia.

¹²⁰ 2002 Report on the Situation of Environment and Natural Resources, Ministry for the Protection of Natural Resources and the Environment, Belgrade 2003.

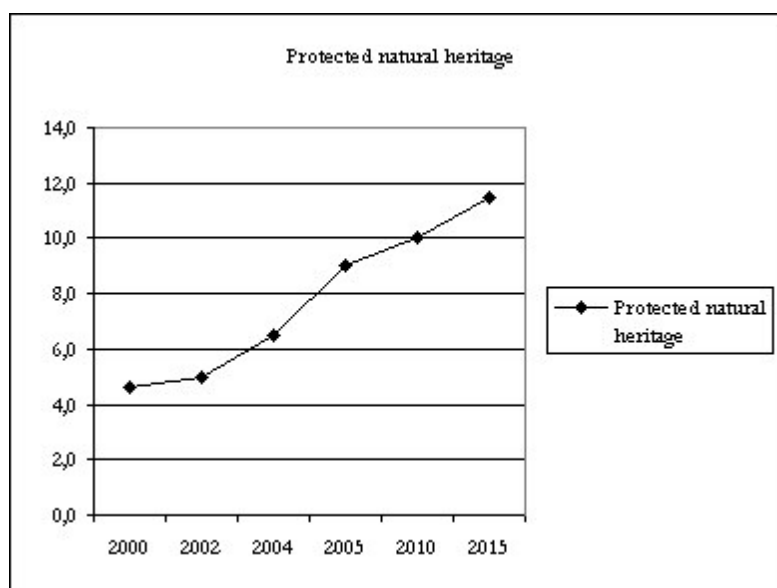
¹²¹ www.worldbank.org/eca/environment.

beauty (9), memorial natural parks (32) as well as natural monuments surrounding immovable cultural heritage (11).¹²²

In 2000, about 4.6 per cent, and in 2002 about 5 per cent of all RS territory was protected.¹²³ The total protected surface area at the moment is approximately 6.5 per cent, and the target is to have nearly 9.0 per cent of all Serbian territory under protection by 2005.¹²⁴

Surface area of protected natural heritage in %¹²⁵

	2000	2002	2004	2005	2010	2015
Protected natural heritage	4,6	5,0	6,5	9,0	10,0	11,5



The world's average for protected natural regions in 2002 was 11.7 per cent and 7.0 per cent for the ECA region.

The above-presented data are not supportive of any conclusions regarding the ratio of protected areas to surface area achieved, but they are the only data available. On the other hand, due to the unfavourable economic situation in the country, the funds allocated for these purposes are clearly insufficient.

Indicator 27. Energy use (kg oil equivalent) per \$1,000 GDP (PPP) (IEA, World Bank)

The economic situation, outdated technologies and wear and tear of energy facilities and production capacity, with the infrastructure for supply of energy sources inherited from the last decade, caused a significant worsening of the real efficiency of energy use in Serbia in comparison with other European countries in transition in the 1990s.

Judging by the trend related to this indicator, energy use efficiency will not reach its 1990 level before 2015.¹²⁶

¹²² Nature Conservation Institute of the Republic of Serbia.

¹²³ *2002 Report on the Situation of Environment and Natural Resources*, Ministry for the Protection of Natural Resources and the Environment, Belgrade, 2003.

¹²⁴ Nature Conservation Institute of the Republic of Serbia.

¹²⁵ *2002 Report on the Situation of Environment and Natural Resources*, (former Ministry for the Protection of Natural Resources and the Environment).

¹²⁶ «Serbia Energy Development Strategy until 2015» (According to the dynamic development of Serbia scenario)..

Year	GDP 10 \$ (1994)	Consumption of Total Primary Energy (PE) 10 kg.OE ¹²⁷	Energy Intensity PE kg.OE/\$,1994
1990	26.62	15.84	0.59
1991	11.98	9.10	0.76
1998	14.61	12.23	0.84
2002	13.76	12.44	0.90
2003	14.04	13.55	0.96
2006	16.07	14.69	0.91
2009	18.01	15.46	0.86
2012	21.08	17.08	0.81
2015	24.14	18.00	0.74

Source: Serbia Energy Development Strategy until 2015, Ministry of Energy and Mining of the Republic of Serbia.¹²⁸

Indicator 28. Carbon dioxide emissions per capita (UNFCCC,UNSD) and consumption of ozone depleting CFCs (ODP tons) (UNEP-Ozone Secretariat)

The State Union of Serbia and Montenegro/Federal Republic of Yugoslavia has neither signed nor ratified the Kyoto Protocol to the United Nations Framework Convention on Climate Change relating to reduction of emissions of gases that deplete the ozone layer and cause global warming. Serbia alone, particularly with its industrial activity rate in the last decade, does not represent a source of major carbon dioxide emissions. On Serbian territory, given the drastically reduced industrial production rate during the previous decade, this gas is generated mostly by fossil fuel combustion in steam power plants, heating plants and in residences that are heated by using combustion of such fuels.

All available data are estimated and cannot therefore be regarded as relevant. Any valid information will be provided upon the initial national communication (INC) and presented at the next international conference, in accordance with the obligations of SaM as a party to the United Nations Framework Convention on Climate Change (UNFCCC).¹²⁹

The use of chlorofluorocarbons (CFC) in the Federal Republic of Yugoslavia in 1986 was estimated at 2,250-2,800 metric tons. Owing to measures taken by the Federal Government at that time and by the industry itself, and due, as well, to the economic crisis of that period, the use of CFCs between 1986 and 1990 abruptly dropped, a trend amplified by the war in the region. As a consequence, its use decreased, by 1994, to approximately 900 metric tons. The country itself does not produce CFCs and all the quantities needed are imported.

¹²⁷ kg oil equivalent.

¹²⁸ Serbia Energy Development Strategy until 2015, Ministry of Energy and Mining of the Republic of Serbia.

¹²⁹ IEA Statistics, International Agency, CO2 Emissions from Fuel Combustion, Highlights 1971-2002, OECD, 2004 Edition.

Consumption of ozone depleting CFCs in 1996-2003 ¹³⁰
Serbia and Montenegro

Year	1996	1997	1998	1999	2000	2001	2002	2003
Metric ton	920	832	519	549	307	262	370	412

Indicator 29: Proportion of population using solid fuels

These data are not monitored either globally or regionally. Consequently, they are not monitored in Serbia, either. Approximations can be made by comparing household structures and fuels used as a source of energy, i.e. for heating homes, preparing food and hot water in bathrooms. The Serbia Energy Development Strategy until 2015 foresees a marked increase in the proportion of the population using natural gas, as well as those using central heating, by about 400,000 new customers, or by 180,000 new householders. This is sure to produce the effect of a decreased use of solid fuels.

The results of the 1991 and 2002 censuses¹³¹ show that in 1991, approximately 24 per cent of a total of 2,550,000 residences in Serbia used central floor heating, while the remaining 76 per cent used solid or liquid fuels or electric energy. In 2002, about 32 per cent of a total of approximately 2,750,000 residences used central floor heating (about 26 per cent) or gas heating (about 6 per cent), while the total number of residences which used solid or liquid fuel or electric energy was reduced to approximately 68 per cent.

Proportion of energy sources for final energy consumption according to an accelerated development scenario ¹³²

Final energy consumption per energy source (M t OE)	1990	1994	1998	2002	2003	2006	2009	2012	2015
Solid fuels (M t OE)	1.40	0.69	0.70	0.80	0.91	0.98	1.04	1.11	1.17
%	15.5	15.4	11.0	11.5	12.5	12.2	12.0	11.9	11.7

The Strategy forecasts a fall in the use of solid fuels, while the proportion of the use of electric power and renewable sources of energy tends to rise.

Despite the discrepancies in the data from the previously cited sources, it is reasonable to conclude that, although there has been a reduction of some 50 per cent on 1990, solid fuel (wood and coal) consumption by households in Serbia is still pretty high. Solid fuels are still used by more than 40 per cent, i.e. this source of energy accounts for 37 per cent of all final energy consumption.

Once the proportion of solid fuel consumption is reduced to about 10 per cent by 2015, the proportion of households using them will be around 30 per cent.

Target 10. Halve, by 2015, the proportion of people without sustainable access to safe drinking water and sanitation.

Indicator 30. Proportion of population with sustainable access to improved water source, urban and rural (UNICEF-WHO).

Judging on the information contained in the document entitled "The Basis of Water Management in the Republic of Serbia", adopted in 2002, there is regional variation, in particular in rural areas accounting for about 50 per cent, as to access of the population to clean water either in homes or through water pumps fitted in the yards. Close to 30 per cent of the urban population is occasionally cut off from water supply and between five and seven per cent every day.

Plumbing installations in tenements¹³⁴

¹³⁰ *Serbia Energy Development Strategy until 2015*, Ministry of Energy and Mining of the Republic of Serbia.

¹³¹ Republican Statistical Office and the Public Health Institute.

¹³² *Serbia Energy Development Strategy until 2015*, Ministry of Energy and Mining of the Republic of Serbia.

¹³⁴ Republican Statistical Office and the Public Health Institute.

Year	Total tenements x 10 ³	Equipment total %	Public water supply 10 ³ %	Water pump and similar 10 ³ %
1991	2547	84.1	1783 70.0	359 14.1
2002	2744	88.3	1989 72.5	435 15.9

Sub-standard water quality is a particular problem, since 29 per cent of public water supply does not meet either bacteriological or physical/ chemical standards.¹³⁵ In rural areas, this proportion is even close to 50 per cent. In 1991, it was estimated that 63 per cent of all population had access to public water supply.

Proportion of public water supply samples not meeting quality standards¹³⁶

Region	More than 5% of samples do not meet bacteriological standards	More than 20% of samples do not meet physical/ chemical standards	Does not meet either bacteriological or physical/ chemical standards
Serbia total	49%	41%	29%
Central Serbia	41%	31%	17%
Vojvodina	75%	75%	67%

An insufficient quality of fresh water supplies is still a serious problem in many regions, and it requires our special attention.

In the period until 2015, a 15-20 percent improvement of water supplies is foreseen in rural areas, and a 30 percent improvement for marginal population groups.

Indicator 31. Proportion of population with access to improved sanitation, urban and rural (UNICEF-WHO)

Sanitation considerably lags behind water supply.

Access of the population in urban and suburban areas to sanitation in 1991¹³⁷ :

Territory	Urban and Suburban Areas
City of Belgrade	68
Central Serbia	55
Vojvodina	45
Total	55

According to UNECE¹³⁸, in 2002 approximately 67 per cent of households in central Serbia, including Belgrade, and 45 per cent of households in Vojvodina, had access to a sewer system.

Tenements having access to some kind of sanitation¹³⁹

Year	Total number of tenements x 10 ³	Access to a public sewer system x 10 ³ %	Access to a septic tank or similar x 10 ³ %	Total x 10 ³ %
1991	2,547	1,172 46.0	970 38.0	2,142 84.0
2002	2744	1,267 46.2	976 35.6	2,243 81.7

The total quantity of public and industrial waste water in Serbia was estimated in 1990 to be equivalent to 14 million inhabitants (EC)¹⁴⁰, and the total water purification capacity of some 40 purification plants estimated to be equivalent to about 1 million EC, or approximately 7 per cent of the total. Only a number of these plants are able, aside from primary water treatment, to provide secondary or biological treatment; and none of them can provide tertiary treatment, i.e. elimination of nutrients containing nitrogen or phosphorous chemical compounds.

¹³⁵ Public Health Institute of the Republic of Serbia.

¹³⁶ Public Health Institute of the Republic of Serbia.

¹³⁷ *The Basis of Water Management in the Republic of Serbia*, 2002.

¹³⁸ Description of the state of the environment in Serbia in 2002, UNECE, 2003.

¹³⁹ *The Basis of Water Management in the Republic of Serbia*, 2002.

¹⁴⁰ Danube Pollution Reduction Programme National Reviews 1998, FRY Technical Reports, Part D.

Moreover, some of them are currently not operational, and most of those that are, operate with a greatly reduced efficiency.

As planned in *The Basis of Water Management in the Republic of Serbia*¹⁴¹, by 2021, about 82 per cent of the population should be connected to a public sewer system, of which some 90 per cent in central Serbia and Vojvodina and around 60 per cent in Kosovo and Metohija.

The MDG target for this indicator, by 2015, for low and middle-income (LMI) countries is 72 per cent, and 95 per cent for the Europe and Central Asia region, while the current average for LMICs is 52 per cent. It is realistic to expect this target for the LMICs to be reached by 2015, but the extremely low level of treatment of public and industrial water before being released into recipients remains a very serious problem.

Indicator 31a. Management of public and hazardous waste

Approximately 2,200,000 tons of solid waste originates in Serbia each year. Only 60-70 per cent of it is collected in an organized manner and taken to one of the 150 dumps that are, in most cases, from the sanitary point of view, poorly organized, and with a very low recycling rate. The first proper sanitary dump in Serbia was put into operation in Vranje just recently. The remaining 30 – 40 per cent of solid waste still ends up in open dumps.

Nearly 1 million tons of various kinds of hazardous waste is mostly stored in unacceptable and inadequate conditions where it originated, since Serbia has neither a hazardous waste disposal facility nor any plant for recycling or destroying such waste.

Finally, 6 to 7 million tons of ashes from steam power plants is dumped each year on equally inadequate dumping sites, causing sustainable pollution of air, water and soil.

This parameter is extremely important in view of the total lack of an integrated system for managing public and hazardous waste and its impact on water resources and soil pollution.

Target 11. By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

Indicator 32. Proportion of households with access to secure tenure (UN-HABITAT)¹⁴²

There is currently no official data for this indicator that would provide a better understanding and monitoring of improvements in this area. There are three basic population groups in Serbia with no access to secure tenure. They include dwellers of the so-called "wild settlements" (shantytowns) or slums, refugees and internally displaced people living in collective centers, as well as individuals with no homeownership or residency rights. The Roma are the largest group living in the "wild settlements" and their number is estimated by various sources to be between 100,000 and 450,000. The estimated total number of refugees and IDPs in Serbia is roughly 470,000 with some 120,000 being poor. It is very difficult to put the total number of those with no access to secure tenure even approximately.

According to the 2002 census, there were 2,521,190 households and 2,743,996 residences in Serbia. This shows that there are more residences than households in Serbia, meaning that some households have more than one residence.

RECOMMENDATIONS

To achieve the set targets of Goal 7 by 2015, it will be necessary to:

- Strictly apply the principle of sustainable forest use, along with intensified reforestation to enlarge the current proportion of land area covered by forests in Serbia;
- Raise the current proportion of protected natural areas to 11–12 per cent; while the level of their actual protection will be dependent on investment levels in the future;
- Improve energy consumption efficiency to achieve its 1990 level;
- Reduce the proportion of households using solid fuels to 10 per cent;
- Improve the proportion of population with access to clean water, primarily in rural areas, as well as to an improved water supply for all population;
- Improve the proportion of population with sustainable access to sanitation, including capacity for the treatment of public and industrial waste water by building new purification plants and reconstructing existing ones.

¹⁴¹ *The Basis of Water Management in the Republic of Serbia*, 2002.

¹⁴² *The National Waste Management Strategy*, Belgrade, 2003.

- Reduce, as much as possible, the proportion of the population with no access to secure tenure;
- Establish a system for managing public and hazardous waste to increase the proportion of the population benefiting from waste collection, improve waste recycling, re-cultivate existing dumps, close down and re-cultivate open dumps, and build regional dumps with facilities for destroying hazardous waste.

Finances for the achievement of these goals ensuring sustainability of a healthy environment can be secured, in addition to other sources, through strict application of a policy of fines for polluters and fees for users of natural resources, or by setting up appropriate funds.

The environmental laws and regulations in force have already been largely approximated with EU regulations, and this process is likely to be completed by the end of 2009. Therefore, their full implementation is expected between 2010 and 2014.

Goal 8: Develop a global partnership for development

Target 12. Develop further an open, rule-based, predictable, non-discriminatory trading and financial system. Includes a commitment to good governance, development and poverty reduction, nationally and internationally.

Target 13. Address the special needs of the least developed countries. Includes: tariff and quota-free access for least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt and more generous official development assistance for countries committed to poverty reduction.

Target 14. 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 UN General Assembly)

Target 15. Deal comprehensively with the debt problems of developing countries through national and international measures to make debt sustainable in the long term.

Indicators

Official development assistance (ODA)

33. Net ODA, total and to LDCs, as percentage of OECD/Development Assistance Committee (DAC) donors' gross national income (GNI) (OECD)

34. Proportion of total bilateral, sectoral-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water, sanitation) (OECD)

35. Proportion of bilateral ODA of OECD/DAC donors that is untied (OECD)

36. ODA received in landlocked developing countries as a proportion of their GNIs (OECD)

37. ODA received in small island developing States as proportion of their GNIs (OECD)

Market access

38. Proportion of total developed country imports (by value and excluding arms) from developing countries and from LDCs, admitted free of duty (UNCTAD, WTO, WB)

39. Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries (UNCTAD, WTO, WB)

40. Agricultural support estimate for OECD countries as percentage of their GDP (OECD)

41. Proportion of ODA provided to help build trade capacity (OECD, WTO)

Debt sustainability

42. Total number of countries that have reached their Heavily Indebted Poor Countries Initiative (HIPC) decision points and number that have reached their HIPC completion points (cumulative) (IMF-World Bank)

43. Debt relief committed under HIPC Initiative (IMF-World Bank)

44. Debt service as a percentage of goods and services (IMF-World Bank)

Target 16. In cooperation with developing countries, develop and implement strategies for productive work for youth

Indicators

45. Unemployment rate of young people aged 15-24 years, each sex and total (ILO)

Target 17. In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries

Indicators

46. Proportion of population with access to affordable essential drugs on a sustainable basis (WHO)

Target 18. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications technologies

Indicators

47. Telephone lines and cellular subscribers per 100 population (ITU)

48. Personal computers in use per 100 population and Internet users per 100 population (ITU)

SUMMARY

Achievement of the Millennium Development Goals requires, above all, to establish, in the country, conditions conducive to long-term economic progress. For Serbia, this means a sustainable and dynamic economic growth, based on creation of new jobs and improved productivity. A very important objective in this process is the Government's effort to make Serbia more attractive for investment in production and services. In this way, jobs will be created, employment will rise and long-term unemployment will be curbed. Introduction of new technologies, and improved quality of human resources, will help Serbian products and services to be more competitive on a sound economic basis on the international market, thus leading to a reduced trade deficit. At the same time, that will create an environment favourable to contacts and partner relations between national and foreign companies from all over the world.

However, in order for all this to happen, it will be necessary to give a new impetus to continue the transition process and the overall reforms aimed

at a further substantial improvement of the business environment, encouragement of research and innovation in key sectors, a modern labour market favouring knowledge and skills and providing opportunity for social integration and empowerment, environmental sustainability, and at a modern social security and healthcare as well as an efficient welfare system.

The main targets for Serbia by 2015:

1. Membership of the European Union;
2. Develop sound partner relations with the rest of the world;
3. Manage public finances effectively;
4. Ensure the largest possible proportion of population to have access to new technologies;
5. Improve investment in human resources, enhance lifelong learning, and develop decent and productive work for youth;
6. Provide access by all population to affordable essential drugs.

THE STATE OF THE ART AND TRENDS

Joining the European Union

With the democratic changes in 2000, Serbia stepped up its transition process that had started much earlier and been halted by the events in the 1990s. Since 2000, a significant progress has been achieved in building institutions and developing strategies that are a prerequisite for approaching the European Union. This, in turn, has opened up the prospects for Serbia's full integration in the EU structures.

General requirements imposed on SAP (Stabilization and Association Process) countries wishing to join the European Union do not differ from the entry criteria defined by the Union back in 1993 ("Copenhagen Criteria"). They essentially amount to the need to build stable democratic institutions, to respect human rights and minority rights, to promote the rule of law, to carry out economic reforms towards a functioning market economy,

as well as to harmonize national legislation with EU regulations. In addition, the SAP imposes as a further precondition stabilization of the region, insisting on the development of regional cooperation and compliance with international obligations (primarily cooperation with the Hague Criminal Tribunal for the former Yugoslavia - ICTY)¹⁴³. The Union assesses the success of reform in a country and its approximation to EU standards in a Feasibility Study (FS) for the country concerned.

On 12 April 2005, the European Commission approved the Feasibility Report on the Preparedness of Serbia and Montenegro to Enter SAA (Stabilization and Association Agreement) Negotiations. The Feasibility Report acknowledged that Serbia and Montenegro was a pro-European and reform-oriented country and that it had met certain political and economic criteria. The Commission had thus recommended the commencement of negotiations, which was endorsed by the Council of the European Union meeting in Luxembourg on 25 April 2005.

The strategy of Serbia for joining the EU is based on the provision of optimum mechanisms and forms of cooperation beneficial to both sides. With the framework of this cooperation, Serbia has identified the following priorities:

- To build institutions (reform of administration, the judiciary and security sector, modernization of the customs and taxation system);
- To promote economic development and market reforms in key areas (education, primary health care, environment, power supply, transport);
- To develop projects (encouraging employability and development of a civil society and social structures);
- To insist on the development of regions (development associated with greater employability in underdeveloped regions, development of local authorities and infrastructure).

As regards their importance for the country, the priorities of EU financial assistance to Serbia are as follows:

- projects encouraging employability;
- incentives to entrepreneurs and privatization;
- institution building (public administration and civil society);
- improvement of infrastructure (telecommunications, transport, energy);
- development of new technologies and their practical applications;
- improved commercial laws and their harmonization with EU laws and regulations.

Target 12. Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

The volume and pattern of Serbia's trade, in particular its exports, deteriorated considerably in the 1990s. There are many reasons for this. A delayed transition caused by wars in the territory of the former Yugoslavia and the trade embargo imposed by the international community, coupled with very bad internal economic policies pursued, were the main reasons for the collapse of the Serbian economy. This resulted in the shrinking home market and loss of traditional export markets. In the meantime, competitive edge and other criteria required on the international market have changed. Consequently, despite the relatively intensive reform in the field of legislation, the non-restructured Serbian economy is still not able to improve, to any more significant extent, the trade patterns to its disadvantage.

A large trade deficit has always been a huge problem for the Serbian economy. On the one hand, it has been the consequence of the fact that the Serbian economy is largely dependent on imports of raw materials and equipment, while, on the other hand, performance in the traditionally export-oriented sectors has worsened in comparison with 1989. Besides, the trade liberalization introduced in 2000, in conditions of shortage of domestic products, has brought about an increase in imports. However, the trade deficit has been offset to a certain extent by a positive balance on the invisible trade account, owing to remittances and a surplus in the services sector.

Financial system and debt sustainability

The reforms carried out in the public finances and banking sector since 2000 have helped achieve macro-economic stability as a precondition of a dynamic and sustainable growth. The annual rate of inflation from 591.2 per cent in 1990, 9250.4 per cent in 1992 and 91.8 per cent in 2001 was slashed to 10.1 per cent in 2004.

¹⁴³ *Report on Transition in Serbia and Montenegro*, G17 Institute, Belgrade, 2004.

The investment rate (a GDP share of investments made in percentages) is relatively low to cater for the needs concerning the modernization of the economy and the service sector, and creation of new jobs to address a very high recorded unemployment and long-term unemployment. In the past four years, the rate of investment increased from 9.3 per cent in 2001 to 15.5 per cent in 2004. However, the achieved rate is still much lower than in 1990, when it was 19.4 per cent. It is, therefore, necessary to continue to implement monetary policy measures encouraging domestic savings. The measures adopted in the fiscal sector, such as reduced tax rates for employers who invest more and the introduction of the value added tax (VAT) bringing some order as regards the dues paid to the State, will make the taxation system stable, reduce the adverse effects of the shadow economy, and improve in the long run the investment rate.

Serbia and the other countries which have emerged following the disintegration of the former Yugoslavia have been saddled with a heavy debt burden for almost three decades. A large portion of the present debt was incurred in the latter part of the 1970s and the early-1980s.

However, after the democratic changes which took place in 2000, Serbia conducted and successfully concluded the negotiations with the Parisian Club of government creditors and with the London Club of commercial creditors. Owing to this, the level of Serbia's foreign debt in 2004 stood at about 34.6 per cent of its gross domestic product (GDP)¹⁴⁴. As a result, Serbia's position externally has much improved.

Development of education and primary health care as a function of improved human resources and standard of living

Since 2001 education and primary health care have undergone reform on a sustainable basis. The situation in these sectors has been progressively improving when it comes to investment in these activities that are treated in the present-day economics as development factors.

The GDP share in total spending on education was lower in 2000 (2.5 per cent) in comparison with 1998 (3.1 per cent). In the period from 2001 to 2004, this share constantly increased, so that in 2004 it reached 3.5 per cent, which still falls short of the desired level. A further increase is expected by 2015 up to the optimum level assuring quality in the development of human resources.

The GDP share in spending on health care has had a similar trend as in education – a decline until 2000, and from then on a gradual slight increase. In 2004, this share was 6.5 per cent, which is also rather low given the speed of the development of new technologies in the manufacture of drugs and equipment.

RECOMMENDATIONS

The main targets by 2015 in relation to development of a global partnership for development include:

- **EU membership**

In the period of the implementation of SAA, Serbia anticipates an inflow of direct investment from EU Member States to achieve a sustainable, dynamic growth based on skills, productivity and competitiveness, and to reduce trade deficit and unemployment substantially. Therefore, it will be necessary to improve labour skills by investing much more in human resources and enhanced possibilities for lifelong learning. An improved employability and economic empowerment and social integration will also require an additional financial assistance from the relevant EU funds.

- **Develop sound partnerships with the world**

Serbia should develop an export strategy based on improved competitiveness and marketing of its products as well as on more up-to-date technologies and similar factors. That way it will be able to make an array of different products and to meet the demands of selected segments of the market. Its possibilities for improving technologies are limited, indeed. However, it can make up for it by systematically developing partnerships with other countries, developed countries in particular, which could greatly improve its trade flows. In addition, foreign direct investment inflow is important for a more rapid development of private entrepreneurship and for small and medium-sized enterprises (SMEs). It will be necessary, therefore, to bring foreign investors to Serbia, who will be willing to invest in both existing, restructured companies and in the establishment of new ones. They should also

¹⁴⁴ In using the IMF methodology, the Ministry of Finance of the Republic of Serbia included in the total debt burden of Serbia only the debts directly contracted by it or collaterals countersigned by it on loans to be repaid to foreign creditors (indirect debt). See, *Public Finances Bulletin No. 5/2005*, Republic of Serbia, Ministry of Finance, Belgrade, 2005.

bring the necessary *know-how* that will help improve the efficiency of production and the services, as well as their competitiveness on domestic and foreign markets.

- **Manage public finances effectively**

The public finances system should be stable and provide incentives for employers and workers alike. To this end, the relevant legislation will be brought in conformity with EU laws and regulations. The policy of public finances will serve the purpose of a dynamic and sustainable economic growth and social development. It will be committed to economic empowerment, social integration and poverty reduction.

Programmes in education, health and other social services, and public services will need to be subject to scrutiny for assessment of effective use of all the resources.

- **Make available the benefits of new technologies**

The development of education, along with the development of telecommunications and information technologies (IT), will make sustainable use of the Internet and IT available to far more people than ever before, while the services provided in this sector will become more effective. Furthermore, access to the Internet will substantially improve the efficiency and schooling record of youth, their employability, as well as professional and geographic mobility.

- **Improve investment in human resources**

It is necessary to develop and implement a national strategy on human resources development and lifelong learning programmes. Such a strategy will, among other things, develop decent and productive work for all people, and youth in particular.

- **Provide access by all population to affordable essential drugs**

To have an improved access of all the population to affordable essential drugs, it will be necessary to carry the reform of the health care system through and allocate more funds for these purposes.

ANNEX 1: Millennium Development Goals – Indicators

Commentary

The United Nations defined eight development goals, eighteen targets and forty-eight indicators to observe the achievement of the set targets and goals.

Based on the review of realization of Millennium Development Goals in the period from 1990 to 2004, the Member States are to make a report or an executive summary of:

- Tendencies of Millennium Development Goals achievement in the previous period,
- The level and state achieved in the area of Millennium Development Goals,
- Assessment of the speed of the implementation and expected level of accomplishment of each of the eight Millennium Development Goals by 2015

Starting from the time available for the preparation of Millennium Development Goals documents and from the information on the basis of which the minimum number of indicators for monitoring the Millennium Development Goals for the given period can be obtained, the Working Group of the Republic of Serbia's Government decided to make an overview at this stage. Supported by UNDP, the Working Group set up a team of experts entrusted with the task of preparing a Draft Review of Millennium Development Goals in Serbia.

The expert team, sticking to the indicators recommended within the specific targets and goals, made an effort to develop a system of indicators specific for Serbia, excluding Kosovo and Metohija, for the period 1990-2004. For calculation of indicators, they used, above all, the statistical data from publications issued by the Statistical Office of the Republic, National Bank of Serbia, National Employment Agency, then from publications and documents of Ministries, as well as the data prepared by some Ministries, especially for the preparation of this Review. Besides, in the judgment of experts who prepared the Review, other relevant publications, too, were used as data sources.

The choice of the additional vis-à-vis recommended, or instead of the recommended, indicators, was made on basis of the experts' assessments which were always guided by the need to explain Millennium Development Goals tendencies and circumstances in Serbia, considering the specific qualities of its development in the 1990s, changes carried out in October 2000, and intensification of the transition and reform processes since 2001.

Certain indicators have been taken from DevInfo base.

Working on this Review, the expert team has agreed that for the future monitoring of the implementation of Millennium Development Goals a wider system of indicators should be developed for all development goals and by all targets. The expert team's opinion is that it should be within the competence of the Statistical Office of the Republic, but that it is also necessary to work with experts specializing in the relevant fields. Taking into account the importance of Millennium Development Goals, the Statistical Office should launch an initiative for a specialized research to develop a database for the calculation of indicators to monitor the achievement of Millennium Development Goals. For this task to be realized, it is necessary to provide funds from domestic and certain international sources. In addition to its initiative for research, the Statistical Office should draft a budget to finance researches in specific periods, pending research becomes part of the Office regular activities.

**MILLENNIUM DEVELOPMENT
GOALS - INDICATORS
Republic of Serbia Excluding
Kosovo and Metohia**

Goal/Task/Indicator	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
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Goal 1: Eradicate poverty

Task 1: Between 2003 & 2015, provide the establishment of a strong and stable middle stratum of the population

		1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Poverty rate - total, %	%	13.6									15.4		33.3	20.6	10.6	10.5		
Urban population	%										17.9		38.4	22.1	7.8			
Rural population	%										11.1		18.0	17.7	14.2			
Poverty line, US \$ per day	per capita	0.7									1.5		0.9	1.4	2.4			
Poverty deficit, %	%	18.9									26.2		22.3	27.6	21.2			
Percentage of the extremely poor	%	1.5									0.3		2.5	0.4	...			
Share of poorest 25% in national consumption	%														9.3			
Gini coefficient of inequality (all households), %	%	18.0									19.0		20.0	23.0	29.3			
Number of poor persons, in thousands	number	1,057									1,202		2,583	1,590	795	795		

Task 2: Between 2002 & 2015, reduce percentage share of food expenditures by approx. 25%

		1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Share of food expenditures in total family budget, all households, %	%															48	42.5	
Children receiving child allowance	number																	
Families receiving material family support (MOP)	number																	

Children under 5 whose weight-for-height ratio deviates for more than 2 standard deviation scores from that of reference population, %	%														0.5					0.7		
Overweight children under 5, %	%														9.7					15.3		
Children aged 6 months to 5 years with haemoglobin levels below 11 grms/100ml of blood, %	%																			30.8		
Live born children weighing less than 2500 grms at birth	%														5.31	5.22	5.05	5.04	5.08	5.28	5.21	5.44

* Figures for 1988

Source: For the 1988-2001 period - Household Consumption Survey, Federal Statistical Office. For 2002 & 2003 - Survey on the Living Standard, Poverty Reduction Strategy Paper and Strategy Implementation Team of the Government of Serbia. DevInfo database.

Annex 1

Goal 2: By 2015, all boys and girls to have a complete primary education

Table 2: Vlachs by educational background

	Number	Without primary education %	Primary school %	Secondary school %	Junior college education %	University education %	NA
Total	35059	55.09	26.86	13.90	0.90	0.80	2.45
Male	17074	41.88	31.28	20.62	1.26	1.23	3.74
Female	17985	67.62	22.67	7.53	0.56	0.39	1.22

Source: Republic Statistical Office, 2002 Census

Table 3: Monitoring of the age-cohort born in 1970

	Year	Percentage
Born	1970	100
Enrolled in 1 st grade of primary school	1977/78	94.7
Completed 8 th grade of primary school	1984/85	84.4
Enrolled in 1 st grade of secondary school	1985/86	76.0
Completed 2 nd , 3 rd , 4 th grade of secondary school	1988/89	69.7
Completed 4 th grade of secondary school	1988/89	40.6
Enrolled in 1 st year of junior college and university	1989/90	20.9
Completed 4 th year of college	1992/93	2.7

Source: Perazic, 1995

Table 4: Percentage of population aged over 15 with no primary education

<i>Population older than 15</i>	1991	2002
Without primary education – total	33.6	21.9
Roma without primary education	68.9	32.5

Source: Census

Table 5: Population aged 15 and over by gender and educational background 1991 and 2002

	1991 (percentage)		2002 (percentage)	
	Female	Male	Female	Male
Without primary education	40.22	26.54	27.20	16.06
Primary education	24.69	24.28	24.72	22.97
Secondary education	26.95	37.60	36.43	46.08
Junior college level and university education	7.35	10.67	9.87	12.27
NA	0.79	0.90	1.78	2.61

Source: Republic Statistical Office, Census

Table 6: Illiterate population aged 15 – 24 by gender and age 1991 and 2002

	1991		2000		
	Female	Male	Female	Male	Total
Total	346967	71975	197654	35271	
Age 15 – 24	4509	3409	3367	3117	6484
Roma aged 15 – 24			1737	1107	2544

Source: Republic Statistical Office, Census

Goal 3: Gender Equality and Women's Empowerment

Students enrolled in post-secondary and university level education by gender - 1991 and 2002

Year	Students enrolled		Children aged 19		Girls enrolled per 100 boys	Girls per 100 boys aged 19
	Girls	Boys	Girls	Boys		
1991	25061	24138	49194	51041	104	96
2002	37203	33062	50637	52748	112	96

Percentage distribution of students enrolled in post-secondary and university level education by gender - 1991 and 2002

Year	Students enrolled per 100 children		Students enrolled (%)	
	Girls	Boys	Girls	Boys
1991	25	24	50.9	49.1
2002	36	32	52.9	47.1

Higher education graduates by gender - 1991 and 2002

Faculties	1991		2002		Women per 100 men	
	Women	Men	Women	Men	1991	2002
Faculties of science	4787	4433	6831	4778	108	143
Faculties of art	177	98	318	172	181	185

Masters and doctors by gender 1991 and 2002

Title	1991		2002		Women per 100 men	
	Women	Men	Women	Men	1991	2002
Master	374	896	404	835	42	48
Doctor	161	462	137	313	35	44

Active employed population by gender and field of activity - 2002

Field of activity	Total	Women	Men	Percentage distribution		Women per 100 men
				Women	Men	
Total	2642987	1117202	1525785	100.0	100.0	73
Agriculture, hunting & forestry	580339	237496	342843	21.3	22.5	69
Fishing	1489	210	1279	0.0	0.1	16

Mining and quarrying	35495	6019	29476	0.5	1.9	20
Manufacturing industry	630129	239341	390788	21.4	25.6	61
Electricity, gas and water supply	46101	9434	36667	0.8	2.4	26
Construction industry	118801	16277	102524	1.5	6.7	16
Wholesale and retail trade and repairs	327547	164058	163489	14.7	10.7	100
Hotels and restaurants	63429	33127	30302	3.0	2.0	109
Transport, storage and communications	146066	32123	113943	2.9	7.5	28
Financial intermediation	36657	24785	11872	2.2	0.8	209
Real estate, letting	82269	38193	44076	3.4	2.9	87
Public administration, defence and social security	131655	48718	82937	4.4	5.4	59

Average earnings by gender and sector of activity - 2003

Sector of activity	Average earnings			Ratio between women's / men's average earnings and total earnings		Women's average earnings compared to men's average earnings
	Total	Women	Men	Women	Men	
Total	17258	17056	17419	98.8	100.9	97.9
Agriculture, hunting and forestry	12919	12213	13164	94.5	101.9	92.8
Fishing	15623	12831	16263	82.1	104.1	78.9
Mining and quarrying	21266	20258	21458	95.3	100.9	94.4
Manufacturing industry	13234	10860	14639	82.1	110.6	74.2
Electricity, gas and water supply	23338	21626	23768	92.7	101.8	91.0
Construction industry	15946	16781	15791	105.2	99.0	106.3
Wholesale and retail trade and repairs	14066	13103	15019	93.2	106.8	87.2
Hotels and restaurants	12257	11682	13094	95.3	106.8	89.2
Transport, storage and communications	20132	20075	20153	99.7	100.1	99.6
Financial intermediation	33576	31564	38030	94.0	113.3	83.0
Real estate, letting	20842	20944	20758	100.5	99.6	100.9
Public administration and social security	24178	23490	25125	97.2	103.9	93.5

Members of the National Assembly of the Republic of Serbia and Government Ministers by gender - 2002 and 2004

Year	MPs		Female MPs per 100 male MPs	Ministers	
	Women	Men		Women	Men
2002	31	219	14	4	15
2004	27	223	12	2	15

Percentage distribution of MPs and Ministers by gender - 2002 and 2004

Year	MPs (%)		Ministers (%)	
	Women	Men	Women	Men
2002	12.4	87.6	21.1	78.9
2004	10.8	89.2	11.8	88.2

Number of legislators, government officials and managers by gender – 2002

Types of profession	Women	Men	Women (%)	Men (%)	Women per 100 men

Legislators	85	330	20.5	79.5	26
Government officials	605	1390	30.3	69.7	44
Local government executives	331	846	28.1	71.9	39
Senior officials of stakeholder organisations	142	263	35.1	64.9	54
Directors and chief executives	5365	15888	25.2	74.8	34
Economic sector executives – managers	5148	13200	28.1	71.9	39
Other sector executives - managers	5513	6356	46.4	53.6	87
Small business executives – managers	16647	38870	30.0	70.0	43

Source: *Women and Men in Serbia*, Statistical Office of the Republic of Serbia, Belgrade, 2005

**HEALTH
DEVELOPMENT
GOALS**

Goal 4: Reduce child mortality 19 19 19 19 19 19 19 19 19 19 20 20 20 20 20
90 91 92 93 94 95 96 97 98 99 00 01 02 03 04

Target 5: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

Under-five mortality	Rate	18.3	16.8	18.2	19	17.4	15.7	16.5	13.6	13.3	12.7	12.7	11.8	11.5		
Under-five children who died from acute respiratory infections	Number	104	81	97	92	97	60	85	50	47	33	36	21	20		
Under-five children who died from diarrhoea	Number	56	27	21	40	36	36	32	7	9	5	7	6	1		
Infant mortality	Rate	16.4	14.6	16.1	16.8	15.4	13.8	14.6	12.1	11.6	11	10.6	10.2	10.1		
Children who were immunized against measles during the first 18 months of life	%	95.6		95.1	90.1	93.9	96.8	97.1	96.5	92.3	86.6	95.7	93.8	96		
Morbilli in children up to six years - annually reported cases	Number	343	316	289	1750	204		74	45	92	153	7	2	11	6	
Under-five children who died from morbilli	Number	3	0	0	4	0	0	0	0	0	0	0	0	0		
Children who were immunized against diphtheria, tetanus and whooping cough in the first year of life	%	96.2	95.7	96.1	88.2	96.5	97.3	97.2	97.4	97.1	96.9	97.8	97.9	97.8		
Neonatal tetanus - annually reported cases	Number	0	0	1	1	1	3	0	0	0	0	0	0	0		
Perinatal mortality	Rate	14.7	14.3	14.8	15.3	14.7	14.1	13.9	12.9	12.4	11.4	11.7	11.0	11.2		
Liveborns with weight at birth below 2.500 g	%					4.9	5.4	5.4	5.0	5.0	5.1	5.3	5.2	5.4		
Children and teens up to 18 years who died from the external causes of death	%	9.6	12.6	13	8.7	9.6	9.6	9.5	12.4	11.2	12.2	11.7	11.5	9.5		
Proportion of injuries in the morbidity of children and teens up to 18 years	%															
Prevalence of disability in children due to accidents and injuries	Rate															
Infants aged 0-3 months who are fed only breast milk*	%											9.7				
Children aged 0-59 months of life who had diarrhoea during the	%											8.8				

last two weeks*																						
Children aged 0-59 months of life who had diarrhoea during the last two weeks and were taking salts for oral rehydration or an appropriate domestic solution*	%																					21,5
Children aged 0-59 months of life who had acute respiratory infections during the last two weeks*	%																					2.7
Children aged 0-59 months of life who had acute respiratory infections during the last two weeks and received treatment from an adequate health personnel*	%																					96.4
Obese under-five children with (+) 2 standard deviations above the reference median weight for height*	%																					13.6
Under-five children with (> -) 2 standard deviations below the reference value of weight for height *	%																					3.7
Under-five children with (> -) 2 standard deviations below the reference value of weight for height in the population of refugees and displaced persons*	%																					8
Smoking among adolescents (occasional and habitual)*	%																					69.8
Alcohol use among adolescents (occasional and habitual)*	%																					32.8
Drug use among adolescents (occasional and habitual)*	%																					1.8

Goal 5: Improve maternal health

19 19 19 19 19 19 19 19 19 19 20 20 20 20 20
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Target 6: Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate

Maternal mortality	Ratio	11.15	9.215	15.15	12.85	21.11	9.79	9.58	9.13													
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		1	5		9	2	8		3	8							
Liveborns attended by skilled health personnel in the total number of live births	%	98.3	98.1	98.2	98.4	98.3	98.7	98.8	99.1	99.1	98.9	98.7	98.8	99.2			
Women with anaemia aged 15-49 years*	%											26.8					
Specific fertility rates of women aged 15-19 years	rate per 1000	44.5	43.0	39.2	39.5	37.3	34.9	32.3	30.6	28.1	25.8	26.3	26.4	25.3			
Total fertility rate	Children per woman	1.7	1.7	1.7	1.7	1.6	1.7	1.6	1.5	1.5	1.4	1.4	1.5	1.6			
Juvenile terminations of pregnancy – women aged 15-19 years**	Rate													46.5			
Terminations of pregnancy – women aged 15-49 years**	Rate													17.57			
Life expectancy at live birth - total	Mean years													72.32			
Life expectancy at live birth for women	Mean years													75.02			
Life expectancy at live birth for men	Mean years													69.67			
Women aged 15-49 years who regularly visit the gynaecologists*	%											39.2					
Women aged 15-49 years who use some contraceptive method *	%											58.7					
Women aged 15-49 years who use condoms*	%											17.7					

Goal 5: Combat HIV/AIDS, malaria and other diseases

19 19 19 19 19 19 19 19 19 19 19 20 20 20 20 20
90 91 92 93 94 95 96 97 98 99 00 01 02 03 04

Target 7: Have halted by 2015 and begun to reverse the spread of HIV/AIDS

Number of registered AIDS cases***	Number	54	60	78	72	89	104	99	77	109	59	80	80	79	60	57
Incidence of AIDS cases per 1,000,000***	Rate	6.9	7.7	10.9	9.2	11.4	13.3	12.7	9.8	13.9	7.5	10.2	10.7	10.5	8.8	7.6
Prevalence of HIV+ among pregnant women****	%	0	0	0	0	0	0	nd	0.06	0	0	0	0	0		
Estimated number of pregnant women with HIV infection at fertility rate 37.92/1000 (maximum)****	%															13
Estimated number of pregnant women with HIV infection at fertility	%															4

Source:

- Data for all indicators
which are not marked
are from the DevInfo
base

*UNICEF. Research of the multiple indicators
of health status and behaviour of women and
children. Belgrade: UNICEF Belgrade 2001.

**Statistical Yearbook of
Serbia 2004.

***Institute of Public
Health of Serbia "Milan
Jovanović Batut". Data
base 2005.

****UNICEF, Institute G17. HIV transmission from mother to child:
the estimate of cost-effectiveness of the prevention programme.
Belgrade: UNICEF Belgrade Office and the Institute G17, 2004.

*****Commission for Combating HIV/AIDS. The
national strategy for combating HIV/AIDS in Serbia
(2005-2010). Belgrade: Ministry of Health 2005.

goal/task/indicator	1990	1991	1992	3	4	5	6	7	8	9	0	1	2	3	4	5	0	1	20
goal 7:	Protection and improvement of the environment																		
Task 9:	<i>To build a principle of sustainability into state politics and programs, to reduce losses of natural resources and encourage their renewal</i>																		
Percentage of state forested land (25),%	26.6*1						25.6			25.6					24.9				
Protected areas as a percentage of total state territor.(26),%													4.6	5			6.5	9	11.5
Energy consumption (27) kgne*2/\$ GDP	0.59		0.68			0.67	0.69	0.83		1.35		0.87					0.63	0.54	0.48
Emission of CO2 *3 and the use of CFC (28),tCFC/yr								920	831	549	547	340	267	341					
Percentage of population using solid fuels(29), % households		50															40		30
Task 10:	<i>By 2015 the number of people without sustainable access to clean water and basic sanitation should be halved</i>																		
Percentage of population with improved access to a reliable source of clean water																			

ANNEX 2

STRATEGIC DOCUMENTS

1. Poverty Reduction Strategy in Serbia, 2003
2. National Employment Strategy
3. National Plan of Actions for Children, 2004
4. Secondary Education Strategy
5. Adult Education Strategy
6. Draft of Vocational Education Development Policies and Strategies in Serbia, 2005
7. Draft Roma Education Enhancement Strategy in the Republic of Serbia, 2003
8. Integrated Action Plan for Roma Education, Housing, Employment and Health-Care in Serbia, 2004
9. National Strategy for Addressing Refugee and Displaced Persons Problems with Implementation Program , 2002
10. Health Policy of Serbia, 2002
11. Draft Vision of Health-Care System in the Republic of Serbia, 2002
12. Draft of Health-Care System Reform Strategy and Action Plan, 2003
13. National Strategy for Combating HIV/AIDS in Serbia (2005-2010), 2005
14. Programme of Population Protection against Tuberculosis, 2005
15. Regional Plan of Serbia, 1996
16. Energy Development Strategy of the Republic of Serbia by 2015, 2004
17. Agriculture Strategy of Serbia, 2004
18. National CFC Phase-Out Programme in Serbia and Montenegro
19. Water-Management Basis of the Republic of Serbia
20. National Waste Management Strategy, 2003
21. Small and Medium-Sized Enterprises Development Strategy, 2003
22. Action Plan for Support to Medium and Small Businesses Development, 2004