

THE STATE OF CHILDREN IN SERBIA 2006

POOR AND EXCLUDED CHILDREN

For every child
Health, Education, Equality, Protection
ADVANCE HUMANITY

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**WITH FOCUS ON POOR
AND EXCLUDED CHILDREN**

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Ann-Lis Svensson
UNICEF Area Representative for Serbia,
Croatia and Montenegro

Editor

Jadranka Milanovic
UNICEF Belgrade
Communication Officer

Proofreading

Vlado Djukanovic

Design

Rastko Toholj

Cover photo

Zoran Jovanovic Maccak

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Contents

ACRONIMS AND ABBREVIATIONS	6
---	---

FOREWORD	7
---------------------------	---

INTRODUCTION	9
-------------------------------	---

POVERTY AND SOCIAL EXCLUSION	13
---	----

1 Defining poverty and social exclusion	13
2 Poverty and social exclusion of children differ – children must be a priority	14

CHILD POVERTY AND EXCLUSION IN SERBIA	17
--	----

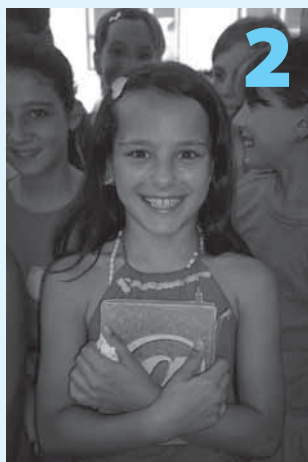
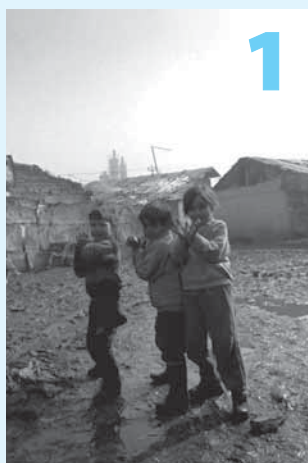
1 Monetary indicators	17
2 Some non-monetary poverty indicators	21

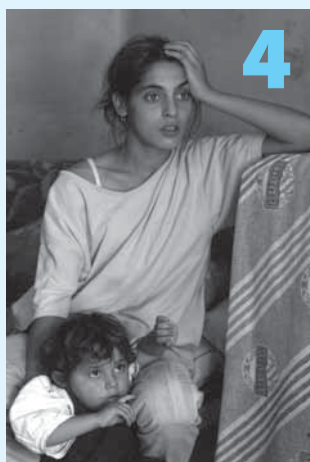
GRAPHS

#1 Percentage of people below poverty line, 2002–2003.	18
#2 Percentage of households below poverty line, 2002–2003.	18
#3 Characteristics of households and poverty line – only children, 2002	18
#4 Structure of expenditures for food	19
#5 How would you describe current financial status in your household.	20
#6 Dwelling conditions	21
#7 Reason why does not attend kindergarten	21
#8 Percentage of population under the poverty line, 2003	26
#9 Percentage of households under the poverty line, 2003	26
#10 Subjective assessment of financial well-being	26
#11 Type of dwelling	27
#12 Reason not to attend preschool	28
#13 Infant and under-5 child mortality, Serbia (national data) and Roma in Roma settlements, (MICS3) 2005.	29
#14 How many times did you hit the child last week	34

ANNEX 1

Total population in Serbia, Census 2002	60
Roma in Roma settlements, MICS3 survey, 2005	60
20% poorest, non Roma MICS3 survey, 2005	60
#1 Children enrolled in preschool education (3 to 7 years)	61
#2 Children enrolled in preschool education (36 to 59 months)	61
#3 Net primary school enrolment ratio	62
#4 Net secondary school enrolment ratio	62
#5 Net enrolment ratio in secondary education	63
Number of children age 3–7 per preschool institution	63
Number of children age 7–14 per primary school institution	63
Number of children age 15–18 per secondary school institution	64
#6 Under-5 mortality rate	65
#7 Percentage of vaccinated children	66
#8 Maternal mortality rate.	66
#9 Share of underweight newborns	67
#10 Share of underweight newborns	67





GROUPS AT RISK OF SOCIAL EXCLUSION 25

1 Roma children in Roma settlements	25
2 Children with disability	30
3 Children deprived of parental care	32
4 Children victims of abuse, neglect, exploitation and violence	33
5 Other potentially excluded groups	35

5.1 Gender aspect	35
5.2 Children from refugee and IDP families	36
5.3 Social and cultural poverty, regional differences, rural–urban differences, underdeveloped municipalities	37
5.4 Child labour	39



POLICY OPTIONS 41

1 At national level	41
2 At local level – Local plans of action for children (LPA)	53
Concluding remarks	55

1.1 Education	42
1.2 Health	46
1.3 Social welfare	49

ANNEXES

ANNEX 1 BASIC DATA ABOUT CHILDREN IN SERBIA	59
--	----

Population	59
Education	61
Health	65

ANNEX 2 TABLES	69
-----------------------------	----

Population	69
Health	72
Education	73
Economy	75

LITERATURE	76
----------------------	----

TABLES

ANNEX 1

#1 Children enrolled in preschool education (from 3 to 7 years) by distance of preschool educational institutions	62
#2 Public expenditure on education as a percentage of GDP	64
#3 Under-5 mortality rates for neighbouring countries	65
#4 Public expenditure on health as a percentage of GDP	67

ANNEX 2

#1 Population, sex	69
#2 Population by main age groups by census	69
#3 Population changes 1994–2005	70
#4 Infant and children mortality 1994–2004	70
#5 Health care children and youth 1994–2004	72
#6 Education coverage preschool, primary school, secondary school and schooling continuation 1995–2005	73
#7 Gross Domestic Product GDP 1999–2005	75

Acronyms and Abbreviations

EU	European Union
ISCED	International Standard Classification of Education
LPA	Local Plan of Action
LSMS	Living Standard Measurement Survey
MICS3	Multiple Cluster Survey
MOP	Type of social welfare benefit/assistance targeting poor families (stands for <i>Materijalno obezbeđenje porodica</i>)
NGO	Non-governmental Organizations
NIP	National Investment Plan
NPA	National Plan of Action
RS	Republic of Serbia
SIF	Social Innovation Fund
UN	United Nations
UNDP	UN Development Programme
UNICEF	UN Children's Fund

Foreword

The State of Children in Serbia 2006 is a report on child poverty and exclusion, and the inter-generational transmission of poverty. The Serbian Statistical Office and UNICEF have facilitated this first Report. In line with Serbia's international commitments, and within the framework of the *World Fit for Children* Declaration, the Report could become an annual and recurrent report of the Government of the Republic of Serbia.

The purpose of this year's Report is to raise awareness of the situation of children in Serbia, especially of those who live in poverty and exclusion. Combating child poverty must be the highest priority in Government since poverty leads to the violation of the rights of children and can have lifelong consequences. This is a call for action, not to permit the exclusion of children and the transmission of poverty to the next generation.

There are over three hundred thousand children in Serbia today who are living in poverty or at risk of poverty. These are children who, because of material, social and cultural deprivation, are unable to realise their rights to education, healthcare, equal development, protection and participation. Those more at risk of poverty are children from large families, children living in rural areas, particularly in South-eastern and Western Serbia and children belonging to certain minority groups.

Among the excluded, Roma children living in Roma settlements are the most excluded. Over 80% of these children are poor and practically all indicators point to unacceptable deprivation and multidimensional discrimination. Roma children from Roma settlements more often suffer from illness and stunting as a result of lack of care and undernourishment, have to take on adult roles in the absence of government assistance, often live in polluted slum areas and have limited access to all services.

There are also other excluded children that must become a priority. They are children deprived of parental care in residential institutions, children living with disabilities, displaced or refugee children, and children victims of abuse, neglect, exploitation and violence. Ingrained behaviour patterns where corporal punishment and interfamily violence is tolerated, where innocence is harmed; where children who are 'not the same as other children' are isolated and hidden, where children remain in institutions causing them lifelong damage, are only some of the issues that must be addressed. Serbia has ratified the *Convention on the Rights of the Child* and by doing so has formally committed itself to ensuring the realisation of the rights of all children.

Good bases exist. The Government of Serbia has developed a *National Plan of Action for Children* based on the *World Fit for Children* and with defined goals and targets by the year 2010. The process of decentralisation of the plan to the municipal level has begun and Local Plans of Action for Children are being developed. The *Millennium Declaration* has been signed, and thus an agreement to strive towards reaching the *Millennium Development Goals* has been set. The Poverty Reduction Strategy has been devised and is being implemented.

To combat poverty in a sustainable way there is a need to get it right for children. Policies must be more inclusive and governments at central and local levels and service providers must be held accountable for the inclusion of all children in good quality services. To ensure results are achieved disaggregated data on children must be collected and progress monitored in a participatory way at local and central level.

Respecting the rights of children, ensuring they get the chance to develop their full potential is an obligation of the government. It is also the best investment a country can make. This Report calls for urgent action. Childhood is an opportunity that never comes back.



Ann-Lis Svensson
UNICEF Area Representative

1

INTRODUCTION

Combating poverty and formulating relevant poverty reduction policies in Serbia are taking place within the framework of two concepts devised and promoted by international institutions: the *Poverty Reduction Strategy*, including the *National Plan of Action for Children* and the *Millennium Development Goals*. The aim of joining the European Union inherently imposes also a third concept and the acceptance of a strategy of social cohesion (social inclusion).

The common denominator of all three concepts is the wider definition of poverty and not the narrow definition i.e. only a lack of income. All three concepts emphasise that development is not an objective unto itself and that the fruit of development should be felt by all social groups.

Serbia's *Poverty Reduction Strategy*, in essence a development strategy, dedicates a

separate chapter to children and youth.¹ In the course of formulating the Strategy an attempt was made to explicitly demonstrate linkages with the *Millennium Development Goals* (MDGs), especially when devising indicators for monitoring its implementation. During the last two years, in the framework of the European integration process, it has become apparent that there is a need to harmonise the *Poverty Reduction Strategy* implementation process with the strategy of social inclusion.

The most important document that defines policies toward children is the Republic of Serbia's *National Plan of Action for Children – NPA*² (adopted in 2004). The NPA is based on four basic principles: non-discrimination, the best interests of the child, the right to life, survival and development and participation.

¹ Government of the Republic of Serbia, *Poverty Reduction Strategy*, Belgrade, 2003.

² Republic of Serbia, *National Plan of Action for Children (NPA)*, Belgrade, 2004.

This document also defines the priority policies towards children:

- Poverty reduction in children
- Quality education for all children
- Better health for all children
- Improve the position of and respect for the rights of children with development difficulties
- Protect the rights of children deprived of parental care
- Protect children from abuse, neglect, exploitation and violence
- Strengthen Serbia's capacity to solve children's problems

In effect this document is an integral part of the *Poverty Reduction Strategy*, and at the same time it is based on the following international documents: the *UN Convention on the Rights of the Child*, the *Millennium Development Goals* and the *World Fit for Children Declaration*, as well as on the documents and programmes *Education for All*, *Health for All in the 21st Century*, *Health 21* and the *Children's Environment and Health Action Plan for Europe*.

Like the NPA, the *Report on the State of Children 2006* focuses on poverty and social exclusion of children and in line with



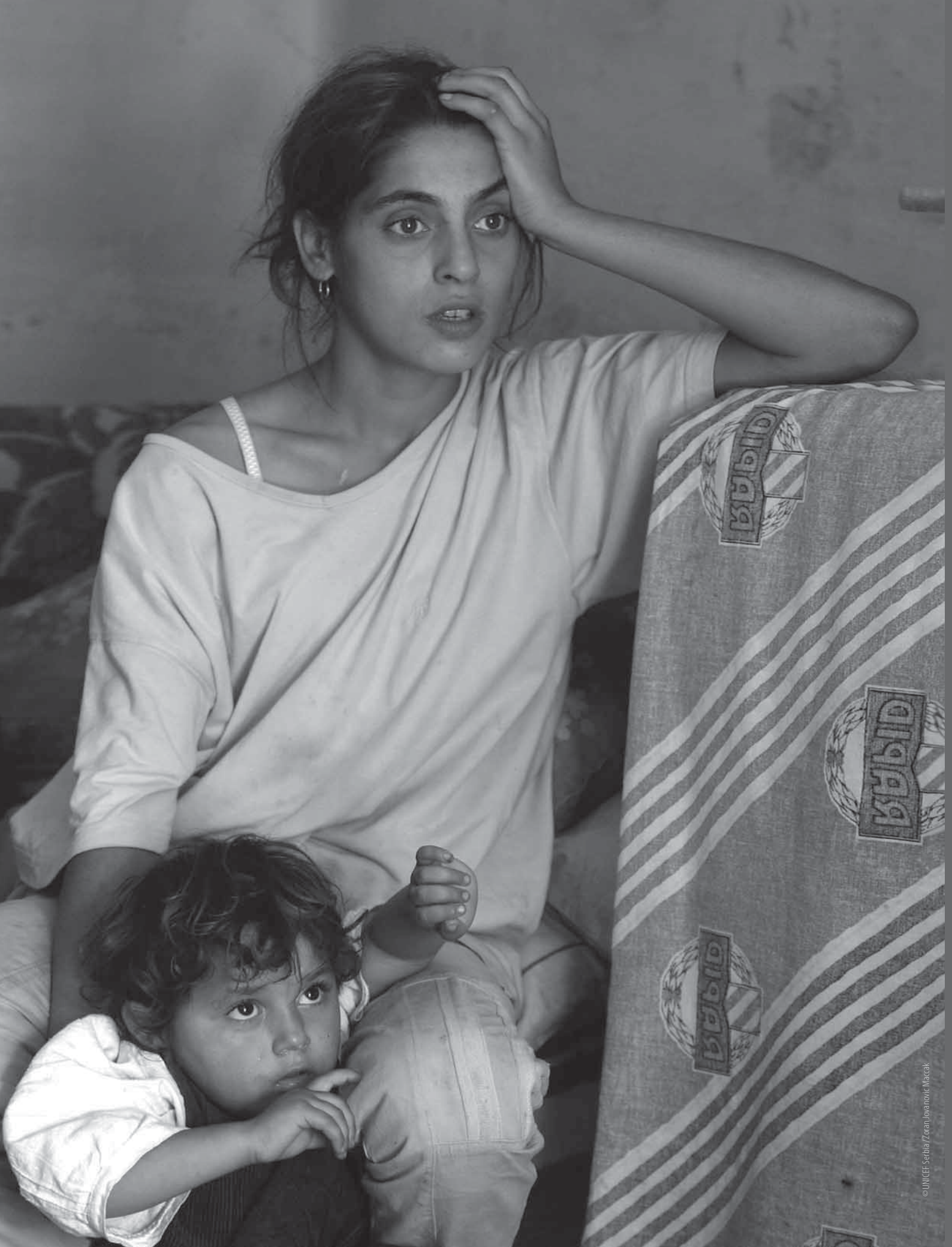
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the wide definition of poverty and social exclusion, it covers all policies towards children that the Government of Serbia has defined as a priority. Based largely on the results of a number of surveys conducted as follow up to the NPA, the report seeks to provide support to the government in fulfilling its international commitment from 2002, in the framework of UN efforts

to build a *World Fit for Children*, where governments are obliged to regularly monitor and report on the state of children at the national level.³

This report, however, has one more objective and that is to raise awareness on child rights of the general public and also of policy and decision makers in Serbia.

³ The majority of the presented research was supported by UNICEF.



2

POVERTY AND SOCIAL EXCLUSION

1 Defining poverty and social exclusion

There are many definitions of poverty and social exclusion, and many attempts to precisely distinguish between these two concepts

Poverty in the narrow sense is usually defined as lack of income, i.e. insufficient consumption. Social exclusion is a wider concept and according to the European Commission it refers to “a process whereby certain individuals are pushed to the edge of society and prevented from participating fully by virtue of their poverty, or lack of basic competences and lifelong learning opportunities, or as a result of discrimination.”⁴

Social exclusion can be assessed only in a relative context; individuals are excluded in com-

parison to others, excluded from the minimum acceptable way of life in states in which they live.

In the widest sense, both concepts refer to lack of access to fundamental rights, lack of employment opportunities, lack of access to health, education and adequate social services, as well as inadequate social participation. The multidimensional approach to both concepts and especially to social exclusion requires an integrated policy approach.

As a rule, the poor are socially excluded. However, social exclusion does not necessarily imply a lack of income – children exposed to violence in financially well-off families, denial of the right to education to women due to prejudice, isolated rural households without access to health care and education are examples of social exclusion where poverty does not necessarily play a pivotal function.

⁴ European Commission, *Joint Report on Social Inclusion 2004*, Luxembourg, COM (2003) 773 final, Brussels, 2004 p. 8.

2 Poverty and social exclusion of children differ – children must be a priority

Poverty and social exclusion of children differ as poverty affects both their present situation and their development and, as a result, their future life chances.⁵

Although the wider definition of poverty and the concept of social exclusion are generally important, they are particularly significant for a realistic assessment of child vulnerability

Growing up in isolation, without access to cultural and educational institutions, or in slums and overcrowded city areas, facing family violence, alcoholism, depression,

leave marks for life, even when the ‘poverty line’ has been surmounted and the household has sufficient income for food and other basic needs.

The Many Faces of Poverty research shows that neither children nor parents define poverty in purely material, i.e. economic terms; they also emphasise educational, cultural, social, material, health and geographical deprivation. Children define poverty as a lack of books, toys, playgrounds, cinemas and theatres, having to walk many kilometres to school, lack of contact with their peers (‘they even stopped calling me’), lack of respect from adults, the teachers’ lack of interest, their parents’ quarrelling. Poverty is also when instead of a toy to play with, a child wishes for a tractor so his parents can work.

The definition of social exclusion of children in the 2006 UNICEF’s *The State of the World’s Children*

For the purpose of this report, children are considered as excluded relative to other children if they are deemed at risk of missing out on an environment that protects them from violence, abuse and exploitation, or if they are unable to access essential services and goods in a way that threatens their ability to participate fully in society in the future.’ Exclusion may include phenomena that are not solely a government’s responsibility; children may be excluded by their family, the community, civil society, the media, the private sector, and other children.

This report introduces an additional concept, the concept of ***invisible children***. It includes children who are not even registered at birth, children victims of trafficking, street children, children who take on grown-up responsibilities too early through premature marriage, childbirth in their teenage years, premature employment, etc. These children are often disappearing from view within their societies.

UNICEF, *The State of the World’s Children 2006 – Excluded and Invisible*, New York, 2005

⁵ Petra Hoelscher, *A thematic study using transnational comparisons to analyse and identify what combination of policy responses are most successful in preventing and reducing high levels of child poverty*, Submitted to European Commission DG Employment and Social Affairs, Final Report March 2004, p. 12.

⁶ UNICEF, *The Many Faces of Poverty – Research on Child Poverty in Serbia*, Belgrade, 2004, p. 8

How children define poverty

When I'm ill and my grandma looks after me she says: 'Where will you go when you have no medical card?'

When my parents quarrel, I go to another room and switch off

I wanted to go to town, but I couldn't

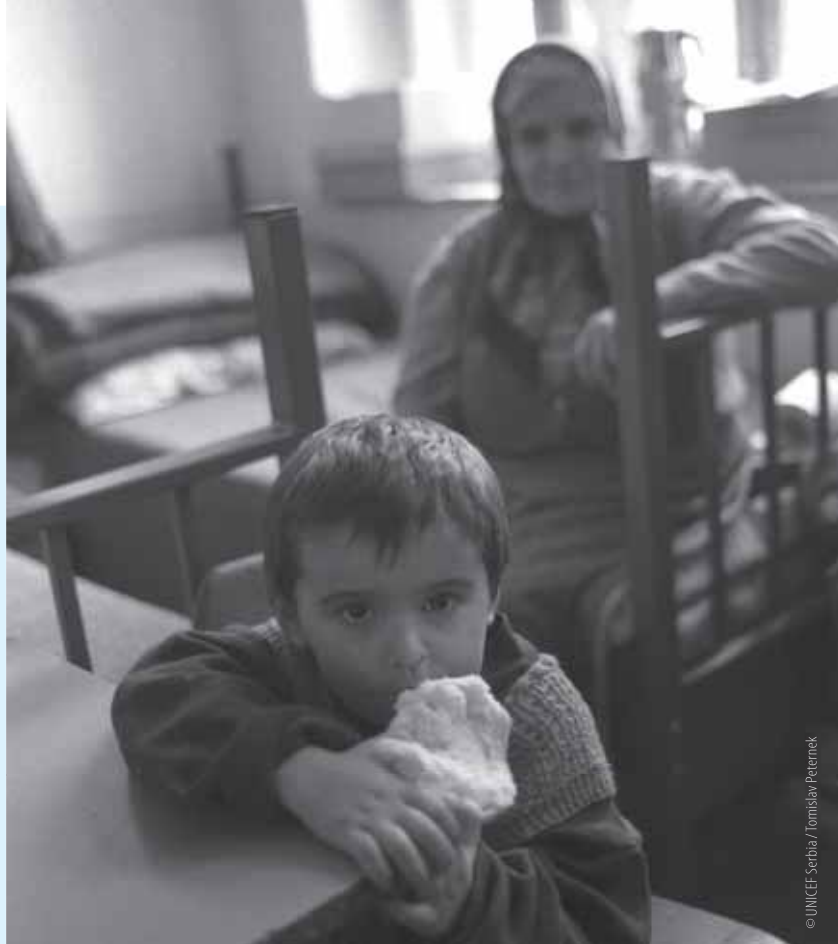
I'd like to have pocket money, and then I'd buy trainers

I have nowhere to study or play; I have nowhere to invite my friends...

When everyone goes on an excursion, I stay at home. So how could anyone be friends with me?

I'd like to say freely who I am and what I am, without feeling ashamed of my ethnic background – I hate situations when people won't be friends with me because of this

UNICEF, *The Many Faces of Poverty*, Belgrade, 2004



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Poverty hits children the hardest and consequences of child poverty are dire – children must be a priority

Poverty hits children hardest because a good start in life is critical to the physical, intellectual and emotional development of every individual.⁷ Poverty in early childhood and especially extreme poverty causing malnutrition, ill health, inadequate parental care and psycho-social stimulation results in damage that often cannot be repaired later in life, even if the standard of living is increased. Poverty has the direst consequences in childhood, more than in other phases of the life cycle.

Even in the case when poverty data do not point to a specific community as being particularly vulnerable in a society, combating child poverty needs to be a priority since reducing

poverty in childhood is often the only way to break the vicious cycle of trans-generational poverty. Poor, malnourished, uneducated girls grow up to become poor, uneducated, malnourished mothers who give birth to underweight babies; mothers who lack access to crucial information; mothers who are unable to support their own children in the learning process.⁸ Thus poverty is transposed to the next generation of poor and socially excluded. Therefore reducing child poverty is fundamental to reducing overall poverty and investment in children today is the key determinant of the success of poverty reduction programmes. The intergenerational transmission of poverty cannot be broken unless children's basic capabilities and skills are developed from birth.

Reducing child poverty must be a priority because children are indisputably poverty's most

⁷ UNICEF, *Poverty Reduction begins with Children*, New York, 2000, p. 2

⁸ *Ibid*, p. 3

innocent victims. The vulnerability of other groups or communities is often, and wrongly, ascribed as 'their own fault' (alcoholism, drugs, laziness, armed conflict, crime, etc.), thus potentially decreasing the willingness of society to intervene. Yet children simply cannot be a cause of the poverty they live in; they can only suffer

the consequences – hunger, illness, exploitation. The moral argument for reducing child poverty is therefore indisputable.

Poverty reduction in children is a state obligation accepted by signing and ratifying the *UN Convention on the Rights of the Child*.

UN Convention on the Rights of the Child, adopted in 1989, and subsequently signed and ratified by 192 countries, defines the human rights of children, encompassing all key elements of poverty and social exclusion. Under the Convention all children have the right to the highest possible health and health care standard, the right to education, social protection, protection from discrimination, abuse and neglect, protection from exploitive forms of child labour that prevents children from attending school, denies them the right to develop...

Article 27 of the Convention deals with protection of the standard of living. This article recognises the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development. The parents are responsible for the child and have the primary responsibility to secure, within their abilities and financial capacities, the conditions of living necessary for the child's development. The obligation of the state is to take appropriate measures to assist parents and others responsible for the child to implement this right and shall in case of need provide material assistance and support programmes.

United Nations General Assembly, *International Convention on the Rights of the Child*, 1989

In view of Serbia's aspiration towards EU integration, Serbia's commitment towards the protection of child rights will be

additionally strengthened by the latest EC initiative to produce an *EU Strategy on the Rights of the Child*.

Towards and EU Strategy on the Rights of the Child

One of the latest initiatives of the European Council is to establish a comprehensive EU strategy to effectively promote and safeguard the rights of the child in the European Union's internal and external policies and to support Member States' efforts in this field.

The EU Strategy on the Rights of the Child is structured around seven specific objectives:

- Capitalizing on existing activities while addressing urgent needs
- Identifying priorities for future EU action
- Mainstreaming children's rights in EU actions
- Establishing efficient coordination and consultation mechanisms
- Enhancing capacity and expertise on children's rights
- Communicating more effectively on children's rights
- Promoting the rights of the child in external relations


European Commission, *Towards an EU Strategy on the Rights of the Child*, COM 367, Brussels, 2006.



3

CHILD POVERTY AND EXCLUSION IN SERBIA⁹

National Plan of Action for Children
I Priority: Poverty Reduction in Children



1 Monetary indicators

In Serbia over 155 thousand children are poor. An additional 155 thousand children are at risk of falling below the poverty line.

According to absolute poverty criteria, the share of poor children, as well as the share of poor households with children is approximately 10 per cent and is close to the share of the poor in the total population.

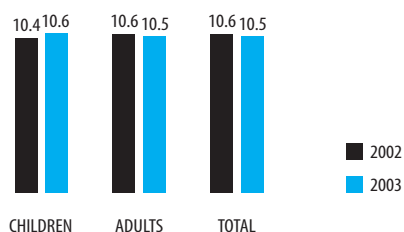
A relatively large number of households with children, however, are found just above the

⁹ The analysis of child poverty and exclusion in Serbia is based on the findings of the *Survey on Child Poverty on the Basis of Existing Data*, Belgrade, 2005 (unpublished). The Survey is based on specially processed LSMS data from 2002 and 2003. The 2002 LSMS was used as a basis for the *Poverty Reduction Strategy* of the Government of the Republic of Serbia. The LSMS is not basically intended for measurement of child poverty, so certain limitations must be taken into account when analyzing the vulnerability of particular population groups. Thus, for example, the share of expenditures of the entire household which is used for children from that household cannot be ascertained. Many important issues about wellbeing of children and respect of their rights are missing, especially those about cognitive, emotional, social and cultural development of children.

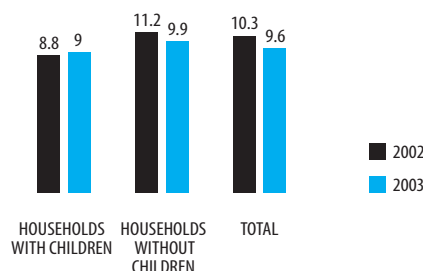
poverty line, and just a small shift upwards of the poverty line, leads to a significant increase in the number of poor. Thus, based on the adopted methodology used in the

PRSP an additional 10 per cent of children living in households just above the poverty line can be termed as being at risk of falling into poverty.

Graph 1 Percentage of people below poverty line, 2002–2003.



Graph 2 Percentage of households below poverty line, 2002–2003.

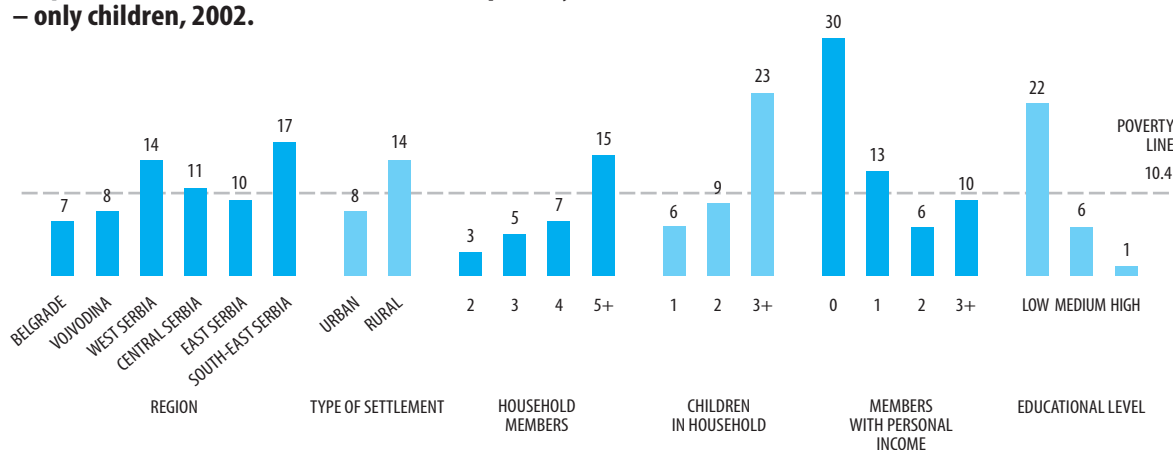


In 2003, neither general population poverty nor child poverty decreased despite the increase in GDP. Experiences from other countries also confirm that economic growth and development do not automatically bring about poverty reduction, especially of excluded groups.

Which children are poor according to monetary criteria

Within the category of poor children, those that are threatened above average are children of primary school age,¹⁰ those living in large families and with more children, children living in rural areas, especially in Southeast and Western Serbia. In the households with poor children the adults usually do not have an income of their own and are less educated. A similar poverty profile is present in the general population.

Graph 3 Characteristics of households and poverty line – only children, 2002.



¹⁰ This conclusion is particularly sensitive and very much depends on the equivalence scale used.

Poor children usually live in households with less educated members

Education is one of the most important determinants of poverty in Serbia. Households with children are no exception; the education level of household members is the most important determinant of poverty. Only 1 per cent of children live under the poverty line in households where at least one adult has a secondary or university degree.

The poorest households with children spend most on food

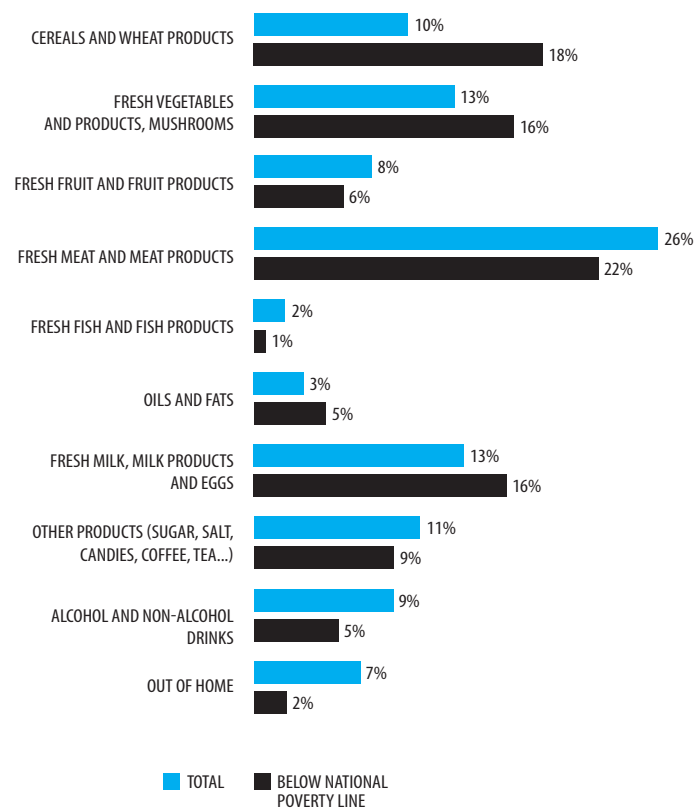
Food accounts for over one half of total expenditure of poor households with children.¹¹ Food expenditures, rent and housing expenses account for almost 80 per cent of the expenditures of these households. Therefore, not much is left for fulfilling other needs. In light of this, it is disturbing that the poorest households spend more on tobacco than on children's education (3.3 per cent and 3.1 per cent respectively).¹²

In absolute terms, food expenditure of the poorest is two times below the national average, while the expenditure structure shows that significantly more is spent on cheaper, high calorie foodstuffs.

Employment is the most significant source of income for the poor

For the poorest families with children, as for all other families, employment is the most significant source of income. However, relatively speaking, the share of income from employment is lower than in other population groups, while pensions as an income have slightly more than average

Graph 4 Structure of expenditures for food (100%)



BASE: POPULATION OF CHILDREN UNDER 18

significance, and especially income from agriculture, gifts, and social assistance (cash benefits).

The significance of employment for the poorest is confirmed by the fact that getting or losing a job was the crucial factor for the changed status of certain households in 2003, i.e. for pushing their consumption above or below the poverty line.¹⁴

¹¹ Compared to other households with children the expenditure structure of the poorest however does not significantly differ from other households with children. The share of food expenditures is also high in households with "medium" living standards. Only the richest 10 per cent of households shows a sharp increase in living standard, with a relatively low share of food expenditure in the total expenditure.

¹² Again, only in the richest 10 per cent of households does the share of expenditure on tobacco lag behind the expenditures on education (1.5 per cent and 3.9 per cent respectively). Similarities between the expenditure distribution/structure of households with children and households in the total population suggests that the inequality between households with children follows the same model of inequality as that of the total population.

¹³ The term *employment* includes also work in grey economy, in accordance with the ILO definition.

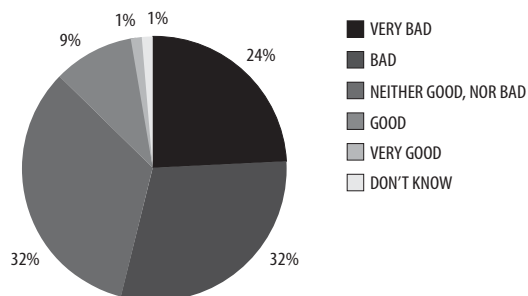
¹⁴ Gorana Krstić, *Poverty in Serbia 2003 and Analysis of Child Allowances*, Beograd (unpublished)



Subjective poverty

Over one half of households with children (56.2 per cent) claim that they are poor, assessing their financial situation as bad or very bad.

Graph 5 How would you describe current financial status in your household



Just like the total population, following the democratic changes in 2000, households with children had expectations that were unrealistically high. In reality, the increase in living standards was small, and still far from being able to cover all the needs that could be covered during the 1970s and 1980s. Insecurity is a fact of life.

Although the correlation between the subjective feeling of poverty and real household expenditures is high, there are diversions in both directions. Thus, among the poor there are those who do not feel poor, while among the well-off there are households which see themselves as poor.

Hence, 4 per cent of the households with children, which are 'objectively' poor according to consumption criteria, do not perceive themselves as poor, while over one third of the better-off think of themselves as poor, i.e. they assess their financial situation as bad and even as very bad.

2 Some non-monetary poverty indicators

Children from poor families live in households that are on average further away from relevant institutions such as schools, health care centres, hospitals, cultural institutions, sports facilities, etc.¹⁵

According to this criterion, not only children from poor households, i.e. below the poverty line, are excluded, but also the majority of children living outside urban areas, especially outside the city of Belgrade.

Dwelling conditions of poor children are below average

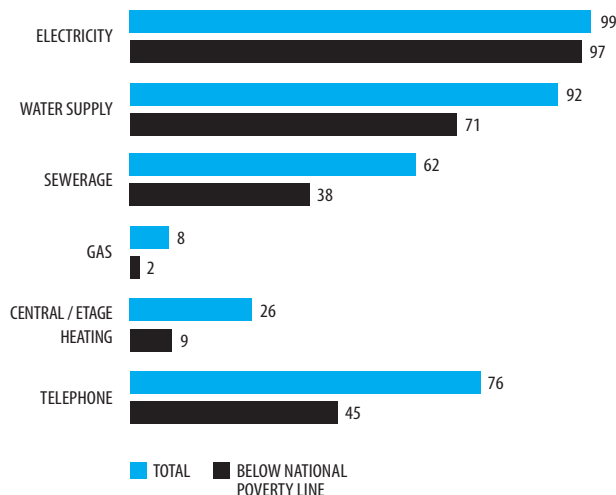
Poorer children live in poorly equipped apartments/houses, with fewer durable goods, in cramped older buildings, with poor utility infrastructure.

According to this criterion, a number of children that are not monetary poor are also excluded. Thus, children living in households without running water and sewer system are potentially excluded.

Poor children less often attend pre-school; a large percentage of them does not receive a basic primary education and does not usually attend additional private lessons or school programmes

It is particularly worrying that 6 per cent of children living under the poverty line do not go to primary school. One of the reasons most often cited for non-attendance is poverty.

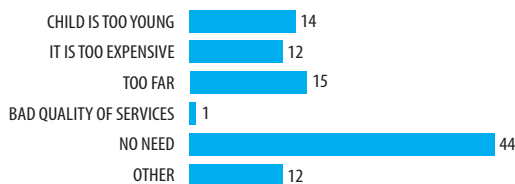
Graph 6 Dwelling conditions



BASE: POPULATION OF CHILDREN UNDER 18

Pre-school institutions are also less frequently attended by children from multigenerational families, from families where the adults are less educated, by children from Western Serbia and from rural areas. Parents usually do not send children to kindergarten because they see no need for it. Some parents say that they think that their children are too young to send away. They also give reasons such as: pre-school institutions are too far away or that they do not have enough money.

Graph 7 Reason why does not attend kindergarten



BASE: CHILDREN POPULATION FROM 3 TO 7 WHO DO NOT ATTEND KINDERGARTEN

¹⁵ The correlation between poverty and the distance from relevant institutions is evidently high and understandable since exposure to poverty is higher in rural and less developed areas.



The study 'Research on Family Beliefs and Care Practices' shows that the majority of parents define the parents' role as focused more on 'care' to the detriment of 'development'. That is why the main reason given for the child's non-attendance of kindergarten is 'no need', since at home they have a family member that can take care of the child, although this attitude fails to address the child's needs that cannot be satisfied by 'staying at home'. In this context, another of the study's findings should also be mentioned – there is a widespread opinion among parents that real intelligence becomes manifest when a child becomes three years old. Parents are less concerned with the cognitive development of children younger than three and do not know enough about the importance of early brain development.

UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished)



Preliminary results from MICS3 clearly show the vicious circle of poverty. Malnutrition and stunting is more present in the poorest 20 per cent of the population than in the general population; only 9 per cent of the children attend pre-school institutions; children more often drop-out of primary schools; and less than two thirds attend secondary school.

Poor children take on the role of adults prematurely. There are more working children among the poor; as much as 19 per cent of the girls marry before they are 18.

The share of children born with a slight physical disability is significantly higher than in the general population.

There is a clearly visible correlation between negative indicators and the parents' low education level.

MICS3¹⁶ – Preliminary results

¹⁶ MICS3 is the third round of Multiple Indicator Cluster Survey on the situation of children and women in Serbia. The Survey represents the largest individual source of data for monitoring progress in achieving internationally defined goals driven from the *Millennium Declaration*, *National Plan of Action for Children* and *A World Fit for Children* document. It should be noted that the 20 per cent poorest in this Survey are defined in accordance with the wealth index criteria which include 19 variables that are highly correlated with children's living conditions.

Incidence of chronic illness is higher among the poorest children

The presence of chronic illness in poor children is above average, while short term illnesses and injuries are rarely mentioned. This could indicate that less attention is given to these types of health problems in poorer families. Findings are similar for children living in rural areas, children in multigenerational families and those where adult members have lower education levels.

Based on the mentioned indicators, in addition to the income poor, an additional number of households with children are vulnerable and potentially socially excluded

Although they are not categorised as monetary poor, according to non-monetary criteria, a number of families with children living in isolated rural areas, in houses without water or sanitation, with less educated adult members and often in multigenerational families are identified as vulnerable and socially excluded.



4

GROUPS AT RISK OF SOCIAL EXCLUSION

General surveys cannot fully cover individual vulnerable groups such as households living in slums, refugees and IDPs in collective centres, children in residential institutions. Additionally, although necessary and providing a good overview of the general situation, national indicators are often not adequate for assessing the situation of vulnerable groups, or for identifying regional and urban-rural differences.

1 Roma Children in Roma Settlements

In recent years a substantial number of research and studies have been conducted focusing on Roma. Data proving the above average vulnerability and social exclusion of the Roma population are unequivocal and alarming. Although most data refer to special samples, usually of Roma living in Roma settlements, the findings are no less alarming. Data shows that almost all children living in

Roma settlements can be considered socially excluded. Even when they are 'above the poverty line' they live far away from health care and/or education centres, lack parental attention, take on adult roles prematurely and are often exposed to multi-dimensional discrimination.

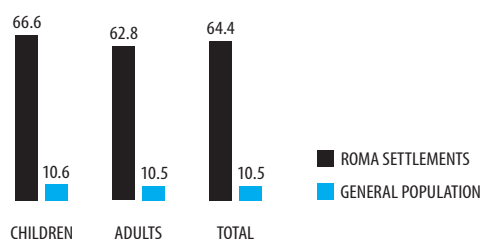
The most important finding on poverty of Roma children in Roma settlements¹⁷

67 per cent of Roma children from Roma settlements are poor, 62 per cent of Roma households with children are under the poverty line, while 90 per cent consider themselves poor

Since the basic population of Roma children is 37,315, it can be estimated that in Roma settlements 25,000 children are poor. Children living outside cities are especially excluded, as are those living in Vojvodina and in larger households with more children.

¹⁷ UNICEF, *Survey on Child Poverty on the Basis of Existing Data*, Belgrade, 2005 (unpublished)

Graph 8 Percentage of population under the poverty line, 2003

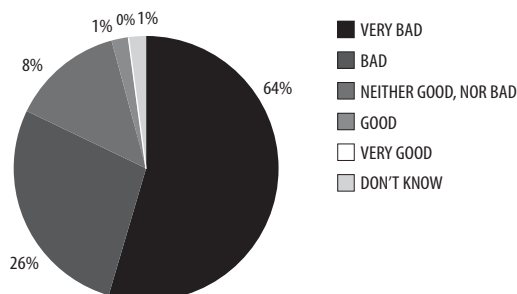


Poverty in Roma children is different depending on the type of settlement they live in.¹⁸ In the slums 83 per cent of Roma children are poor, while in new inner city or suburban communities two thirds of the Roma children are poor (55 per cent).

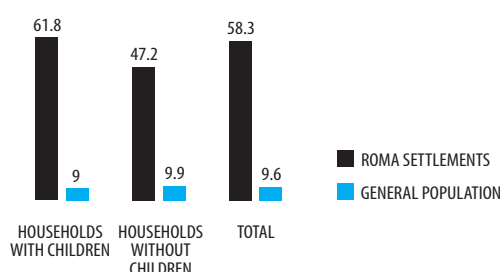
Similar indicators are seen at the household level. 62 per cent of Roma households with children living in Roma settlements are poor.

A subjective feeling of poverty is present in almost all households with children (over 90 per cent).

Graph 10 Subjective assessment of financial well-being



Graph 9 Percentage of households under the poverty line, 2003



If all members of the households are without any formal education and live in a Roma settlement the children will almost certainly be poor

The correlation of poor children with their parents' education in the Roma population is extremely high. According to LSMS data, 87 per cent of Roma children that live in a household with members without even primary education are poor.

The poorest Roma households with children also spend most of their money on food

Similar to the poor in the total population, the poorest Roma households with children spend most of their money on food (over 60 per cent). In the structure of the rest of the consumption in all households, tobacco holds a high position – almost 8 per cent, while expenditures for education are barely over 1 per cent.

Almost every third Roma child aged between 15 and 18 smokes. Since responses were provided by adult household members, it can be estimated that this share is even higher.

¹⁸ There are four types of settlements: slums – extreme poverty communities, partaje or rural settlement within the inner city area, poor village or rural settlement, new inner city or suburban community.

When a household has to spend almost all it has on food it is clear that this is a case of extreme poverty. Yet, often, there is not even enough food. According to the MICS3 preliminary results according to the criteria of body mass for a given age group, as much as 8 per cent of Roma children are underweight.

MICS3 – Preliminary results

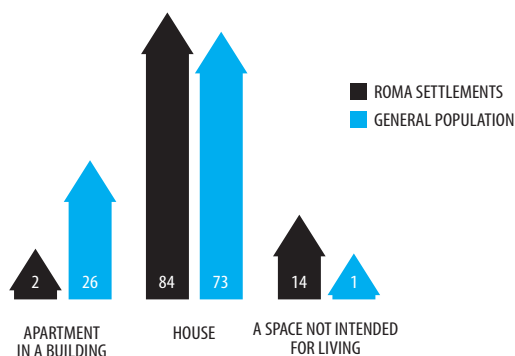
Dwelling conditions of the majority reflect complete deprivation and poverty, with every seventh child living in a cardboard or tin house

According to all parameters the housing conditions of Roma households are significantly worse, even in comparison to the poorest households in the general population. Almost every third child that lives in a slum, or in the Belgrade Roma settlements, lives in a space that is not intended for habitation, most often a cardboard or tin house.

The least favourable housing conditions are those in Vojvodina and in the rural areas.

Concerning durable goods, the Roma population with children lags far behind the poorest households in Serbia. The only commodities

Graph 11 Type of dwelling



BASE: CHILDREN POPULATION UNDER 18

that exist in almost every household are a stove and a television set. Even in the slums, two thirds of households have a TV.

Some additional poverty and social exclusion indicators of Roma families with children (aged 0–6)

- 22 per cent of Roma families from the sample live in dwellings with earth floors, which has health and sanitary implications especially for children
- Young Roma children are more frequently ill, have problems with health insurance, and parents cannot afford to buy over-the counter medicine
- Children lag behind in motoric development: 14 per cent of children older than 3 do not hold a pencil properly (relative to 2 per cent in the general population), and one in four cannot use a toilet independently (relative to 8 per cent in the general population)
- Roma parents rarely or never play with their children, less often respond to children's questions, but more often shout at and beat their children
- A large number of children grow up without reading or story telling, colouring books, singing children's songs
- There are cases of older children taking care of the younger ones, which is especially unacceptable if they miss school.

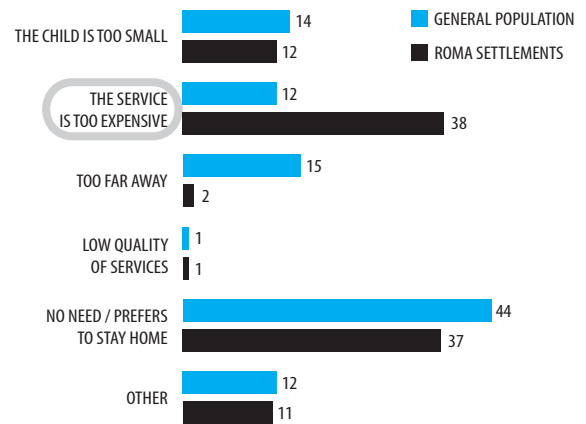
UNICEF research, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished)

Indicators on Roma children education, especially on primary education are unacceptably low

Compared to other children in Serbia aged 3 to 6, the Roma children from Roma settlements less frequently attend pre-school, usually because of a lack of money or because the parents think there is no need.

Almost 30 per cent of Roma children of primary school age do not go to school. Non-attendance is highly correlated to the education level of the parents. Over one half of parents whose children do not go to school say it is because they have no money.

Graph 12 Reason not to attend preschool



BASE: POPULATION OF CHILDREN UNDER 7 THAT DO NOT ATTEND KINDERGARTEN

MICS3 preliminary results even more precisely and more dramatically illustrate the educational handicap of Roma children

Only 4 per cent of Roma children attend pre-school institutions, 76 per cent go to primary school, but only 13 per cent complete it. Secondary school is attended by only 4.8 per cent girls and 12.2 per cent boys.

MICS3 – Preliminary results



Health indicators are also negative

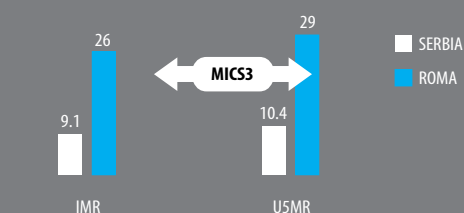
LSMS results indicate that the share of children with chronic illnesses is higher among Roma children, and that only one half of the

chronically ill children receives treatment. Acute, short illnesses and injuries are less reported than in the general children population. Other studies show that the overall health status of Roma children is significantly worse.

Roma child mortality is high

The infant mortality rate of Roma children in Roma settlements is estimated at 26 per thousand, while the under five mortality rate is 29 per thousand. Both indicators are almost three times higher than the official average for Serbia (9.1 and 10.4% respectively)

Graph 13 Infant and under-5 child mortality, Serbia (national data) and Roma in Roma settlements, (MICS3) 2005



MICS3 – preliminary results

MICS3 – Preliminary results

Older Roma children are expected to take on the roles of adults

Although LSMS results do not show that younger Roma children work, it is clear that older Roma children, aged 15 to 18, are ex-

pected to earn a living and take on adult roles. As opposed to most children aged 15–18 who are students, the Roma children of the same age are said to be looking for a job, while others help in the household, are housewives and/or work but are not formally employed.

Early marriage

Over 40 per cent of Roma girls aged 15–19 are married or live in union. As much as 12 per cent of Roma girls aged 15 are married or live out of union.

MICS3 – Preliminary results

2 Children with Disability

National Plan of Action for Children

IV Priority: Improving the Position and Rights of Children with Disability

Official data show that in mid 2006 approximately 6,000 children with disability received carer's allowances and other types of state assistance from the Ministry of Labour, Employment and Social Policy or from the Pension and Disabled Fund. An additional 760 children with disability live in residential institutions.

The National *Plan of Action for Children* reiterates that there are no reliable data, or mechanisms for systematic registration of information on children with disability. Various pieces of research indicate the difficult position of persons with disability, the insufficient sensitisation of the general public to the rights of child with disability, and an extremely low attendance of these children in the education system.¹⁹

According to the opinion of local level institutions' representatives, one of the four greatest problems of children aged 0–6 in local communities is the problem of children with disability²⁰

The main findings from focus group discussions:²¹

- Parents often *hide* children with disabilities
- Parents are *insufficiently informed* on how to help children

- The local level lacks *counselling services and day care centres* for children with disabilities
- Teachers and other children's parents show great *resistance* to including children with disabilities into pre-school institutions and regular schools
- A lack of *professionals* in many municipalities
- Parents discontinue or do not commence the children's *education*. In most municipalities and cities there are no special schools, and sending children to regional centres requires substantial funds and parting with the children, which is unacceptable for many families

The Survey with parents of children aged 0 to 6 partially confirms some of the previous findings²²

Only 3 per cent of the surveyed families 'admit' that they are taking care of a child with disability, while over one fourth claim to know a family/child living with disability. Such a large discrepancy suggests that parents hide children with disability. This is probably true since the survey shows that in Belgrade there are more children with disability than in the rest of the country. Therefore, it is realistic to suppose, that in the rest of Serbia, where people are less informed and aware than in Belgrade, children with disability are underreported.

¹⁹ NPA, p. 52

²⁰ UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished), part of report dealing with focus groups

²¹ Representatives of local governments, health, pre-school institutions, centres for social work and NGOs dealing with problems of children aged 0 to 6

²² UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished).

It is encouraging that the vast majority of respondents (over 80 per cent) claim that the parents take their children out for walks, while a significant number (40 per cent) also claim that the children go to schools or kindergartens.

Furthermore, the survey shows that there is resistance towards inclusive pre-school education. Approximately 16 per cent of parents would be against their children attending a kindergarten with a child with disability. This share is quite high bearing in mind that this was a hypothetical question, when it can be expected that more respondents would provide an answer that is 'politically correct' and not because it is their true opinion. It can be assumed that there are more respondents who agree with the stated opinion, but did not provide a truthful answer because they were embarrassed.

Prejudice towards children with developmental difficulties is also evident in residential institution staff – an additional reason for deinstitutionalisation²³

The traditional perception that children with disability are unable to interact socially and learn, results in less attention being paid to them in residential institutions. Children with developmental difficulties living in residential institutions are often isolated, spending entire days indoor, with insufficient social and emotional stimulation. Testimony to this are the locked toys kept out of the children's reach, placing the children in 'straight jackets' to prevent self harm, as well as the desolate playgrounds and gardens surrounding the homes for children. In the residential institutions themselves this is justified by the insufficient number of staff that cannot pay adequate attention to each individual child.



© UNICEF Serbia / Zoran Ivanović Marček

²³ Browne K, Vettor S, Dejanović V, *Report to UNICEF and the Government of the Republic of Serbia on deinstitutionalization and transformation of services for children in Serbia*, 2006 (unpublished).

3 Children Deprived of Parental Care

National Plan of Action for Children

V Priority: Protecting the Rights of Children Deprived of Parental Care

The latest Ministry of Labour, Employment and Social Policy data show that approximately 7,500 children deprived of parental care are included in the system for social protection. Out of this number the majority is living in the guardianship of a relative, 1,700 are accommodated in residential institutions, and almost 3,000 are living with foster families. Compared to 2004, when the *National Plan of Action for Children* was formulated, the number of children in foster families has increased and the number of children in residential institutions has decreased.

The conclusions in the NPA, however, are still valid.²⁴ There is still an unacceptably high use of institutional forms of protection, especially bearing in mind the dire consequences especially for very young children. In short, procedures for implementing social protection measures for children do not observe child rights as a priority.

Numerous research indicate the inadequacy of institutional protection and the extremely negative consequences of this type of child protection²⁵

Children deprived of parental care accommodated in residential institutions, especially very young children are at risk of harm in terms of attachment disorder, developmental delay and neural development. The lack of a family environment and adequate care increases the chance of

antisocial behaviour, delinquency and crime later in life. This is why, as a rule, children in homes for children deprived of parental care can be considered socially excluded. Advocating for deinstitutionalisation and the development of alternative forms of social protection are largely based on the conviction that early privation and deprivation experienced by young children in institutions is equivalent to violently abusing these children.

Findings from the document *Report to UNICEF and the Government of the Republic of Serbia on deinstitutionalisation and transforming services for children in Serbia*, on children accommodated in 'Stacionar za majku i dete' show that children are mostly taken care of by medical staff who provide adequate health care, but with no psychological or educational programmes. Even older children rarely go outside and there is a noticeable lack of adequate psycho-social stimulation. In these circumstances even non-disabled children show developmental delay and do not begin to walk or talk until later in comparison to children who grow up in a family setting.

Representatives of institutions at local level indicate that children deprived of parental care accommodated in residential institutions have the most difficult problems²⁶

According to the opinion of focus group discussion participants the situation in homes for children de-

²⁴ NPA, p. 59

²⁵ Browne K, Vettor S, Dejanovic V, *Report for UNICEF and the Government of the Republic of Serbia on deinstitutionalization and transformation of services for children in Serbia*, 2006 (unpublished)

²⁶ UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished), report participatory research with focus groups (representatives of local governments, health, pre-school institutions, centres for social work and NGOs dealing with problems of children aged 0–6)

prived of parental care is difficult. The children in child homes lack not only adequate accommodation, clothes and food, but also a feeling of security and intellectual and emotional stimulation.

Institutionalised children are not, however, the only ones from this child group that face problems. In some local communities examples are cited of adopted children who are exposed to discrimination (“This is a small place and everyone knows everyone else. Sometimes adopted children are not accepted”²⁷).

Also, in some local communities children of parents working abroad face difficulties. Children from these families usually stay in the country with their grandparents, deprived of parental love and support.



4 Children Victims of Abuse, Neglect, Exploitation and Violence

National Plan of Action for Children

VI Priority: Protection of Children from Abuse, Neglect, Exploitation and Violence

The *National Plan of Action for Children* states that child abuse and neglect is more frequently known since the beginning of the 1990s, and that the number of registered cases has increased sharply since 2001; the general public is not very sensitive to the issue and the lack of knowledge and skills of professionals all present an obstacle for more efficient social protection.

Physical punishment is still commonplace in disciplining and raising a child in Serbia²⁸

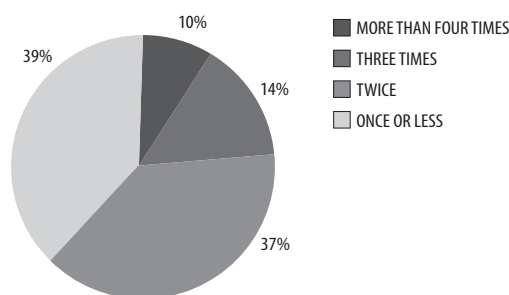
Although physical punishment is seen as socially unacceptable, and an ineffective way of disciplining a child, it is not seen as harmful. ‘Research on Family Beliefs and Care Practices’ findings show that a significant number of parents still physically punish their children, sometimes even with a rod or stick. According to this research, in families with young children, up to 6 years of age, almost 40 per cent of parents hit the child during the week preceding the interviews, and every fifth used a rod or stick. In Belgrade this percentage is over 50 per cent, while among Roma it climbs to 64 per cent. When babies and very young children, who are probably not beaten, are taken out from the total this percentage becomes even higher.

²⁷ Ibid.

²⁸ Ibid.

Participatory research with focus groups conducted at the same time shows that there is no significant public pressure and condemnation of this type of discipline. The focus group participants admit that they would not interfere even if they knew that their neighbours severely beat their children.

Graph 14 How many times did you hit the child last week



How children define violence and abuse

Violence is a physical action where the soul also suffers

Abuse is pecking one's sanity

Violence is when a person is forced to enrol into music school although he would like to be a sportsman

Violation of my privacy (reading my diary) is violence

Mental [violence] cannot be seen but hurts the most

We do not know what is happening because nobody talks about it

The parent says: For as long as I was beating you, you were the best

UNICEF, *Perceptions and opinions on child abuse*, Belgrade, November 2005.

Perceptions and opinions on child abuse²⁹

The most important findings of the research *Perceptions and opinions on child abuse* show that:

- Children distinguish between physical, mental and sexual abuse
- Physical and mental abuse cannot be separated
- Children can identify peer violence; but are resistant to accepting that domestic violence exists in their milieu; and have difficulty in precisely defining sexual violence
- The majority of children believe that every second child is going through some type of abuse and 10 per cent through serious types of physical and sexual abuse
- Abusers are most frequently adults in general, more frequently men and boys
- Among the factors contributing to abuse are the attitudes of society (adults) towards children, patriarchal upbringing and traditional gender roles
- Children often do not disclose abuse – they think adults do not believe them and public services are not child friendly

Physical punishment has not disappeared from schools either³⁰

The research *School without violence – towards a safer and more stimulating environment for children* demonstrates an alarmingly high degree of different types of violence in schools in Serbia. Violence is defined as not only physical, but also as a verbal act with intent to 'hurt, frighten or shame'

²⁹ UNICEF, *Perceptions and opinions on child abuse*, Belgrade, November 2005, qualitative research in 7 municipalities with 10–19 year-old children and young people.

³⁰ Main findings from the study of Dr Dijana Plut and Dr Dragan Popadic, *Schools without violence – towards a safe and stimulating environment for children*, UNICEF, Institute for Psychology, Belgrade Faculty of Philosophy, Belgrade, July 2006, 26 947 students and 3937 adults from 50 primary schools were surveyed.

Different indicators show that at least one fourth of primary school children are exposed to violence by their peers, while according to different indicators between 5 and 10 per cent of the children are extremely endangered

The most common types of peer violence are insults, spreading lies about the 'victim', hitting and threats. Most abusers go to the same school as the victim, and peer violence does not significantly differ by gender or age.

Although a significant number of teachers and other school staff consider school violence as a problem, cross referencing their responses with the responses of pupils shows that 'grown ups' underestimate the problem of peer violence in schools.

Almost every third child in Serbia is exposed to violent behaviour by their teachers. Among those, a significant number is exposed to physical punishment

'As much as 17 per cent of pupils responded that their teacher hit them or pulled their hair or ears at least once during the last three months, while 8 per cent of pupils responded that some of the teachers threatened them.' Among those who were 'physically disciplined', this is something that happens to them every day (every fifth child among those physically punished). Half of the grown up respondents are aware that there are abusive teachers and that in their school at least one or two colleagues act violently.

Violent behaviour of pupils toward teachers is also a problem

Every fourth teacher considers that the extent of the pupils' verbal aggression is alarming, while 12 per cent claims that physical assaults also present a serious problem. Pupils estimate even higher levels of verbal violence by pupils towards teachers.



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A focus group participant claims that a school director stated:

I told them to send me only the worst cases, I can't beat all of them

UNICEF research, *The Many Faces of Poverty*, Belgrade, 2005.

Teachers and school staff believe that the family is the most important factor influencing violent behaviour and that the school's responsibility is less important and does not contribute to increased violence of pupils

The majority of the teachers think that greater commitment in schools can decrease violence primarily through improved communication with parents and the development of non-violent communication skills. It is indicative that a significant number of teachers (40 per cent) opted for punishing the abusers, as a repressive form of decreasing violence, while preventive measures received much less support.

5 Other Potentially Excluded Groups

5.1 Gender Aspect

Under the Serbian Constitution and legal framework women and men are equal. Some indicators, however, especially regarding labour market

status clearly indicate the less favourable status of women.³¹ A large number of the mentioned differences derive from the traditional status of women in society and especially from the patriarchal role of women in family life. The origin of these differences is found in early childhood.

Some Research on Family Beliefs and Care Practices research findings show that even today in Serbia different socialisation models exist for girls and boys from very early childhood, and that these models influence the later division of roles:³²

- In patriarchal rural families and families living in remote villages less emotions are shown to boys, while at the same time boys are given more importance, more is invested in them, and more expected of them in the future.
- Open emotions are shown more to girls, with the explanation that it is in their nature and that it is not good to show emotions to boys.
- Attitudes on teaching girls 'house work' differ. A number of parents think that girls should be taught from early childhood, while others protect the girls 'while they are home with the parents [because] they will have enough house work in their lifetime.'

The family model in which the children grow up clearly determines and shapes the future roles of girls and boys³³

I am equal, but less than my brother

UNICEF research, *Perceptions of and opinions on child abuse*, Belgrade, 2005.

In 92 per cent of the families with very young children (up to 6 years old) the mothers are the primary care takers, regardless of where they live, their material status and household characteristics. They also spend most time with the children. Often, even employed mothers do not have any assistance and this is considered a normal situation that no one questions. Although some fathers are included in some caring activities, their involvement usually amounts to playing with the children or taking them for walks. The division of roles is clear and precise, even in the area of punishment. It is mothers who usually punish the children, yet children are more afraid of their fathers.

5.2 Children from Refugee and IDP Families

During the last ten years there has been much research done on the refugee and IDP population documenting their extremely difficult financial situation, but also their social exclusion.³⁴ Among refugee and IDP children, the most excluded are those living in collective centres.

The Research on Family Beliefs and Care Practices study also shows the difficult position of refugee and IDP households with children 0–6 years old:³⁵

- Refugee and IDP households with young children have inferior accommodation. As many as 41 per cent of these households are tenants (compared to 12 per cent of the total population) and must pay rent as an additional expense

³¹ Women unemployment rates are significantly higher, they wait longer on employment and become employed with more difficulty, have lower wages, are dominant in less profitable sectors, are less present in politics, on management positions and among entrepreneurs. As a result of accumulated differences women's pensions are lower on average.

³² UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished)

³³ Ibid.

³⁴ Economics Institute, *Human Development Report: Yugoslavia 1997*, Belgrade, 1998 and UNDP, *Human Development Report Serbia 2005: The Strength of Diversity*, Belgrade, 2005.

³⁵ UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished)

- Food consumption of these households shows a significant shortage of fruit and meat
- More than two thirds of refugee and IDP parents assess their financial position as bad or very bad
- Parents play with their children less, read to them less and sing to them less
- Parents shout at the children more often
- Children attend pre-school less, usually for lack of funds

Discrimination is present in the context of children displaced from Kosovo and those that took refuge from Croatia and Bosnia. Children state that they are bothered by the fact that other children call them 'Shiptars' (a derogatory name for Albanians) and do not want to play with them.

UNICEF, *The Many Faces of Poverty*, Belgrade, 2004.



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5.3 Social and Cultural Poverty,³⁶ Regional Differences, Rural–urban Differences, Underdeveloped Municipalities

Poverty is most present in households with children living in rural areas and in less developed regions

As already shown, child poverty is much wider among the rural population, especially in the regions of South-eastern and Western Serbia. These areas are also characteristic for their inferior accommodation, remoteness from relevant institutions, inferior infrastructure and utilities, such as roads, water supply, electricity, etc.

Children living in the rural and least developed parts of Serbia are potentially exposed to the risk of being socially excluded not only due to lack of income and low consumption, but also because

of 'socio-cultural' poverty. The *National Plan of Action for Children* also shows that 'Socio-cultural poverty is a particular form of poverty that impacts upon the everyday development of a child and is handed down through generations. This type of poverty is characterised by a lack of socio-cultural infrastructure and is also reflected in the inaccessibility of social and public resources such as healthcare, social protection, culture for children and the like.'³⁷

Children sometime need to travel distances of up to 16 km to school, through forested terrain and on roads without pavements, often in the dark. Even when they can travel to school by bus, parents often cannot afford to pay the fare. Children who travel large distances to school have no time to study, often arrive at school muddy, and need to get up very early. Children, who live far away from school, cannot stay after school to play with their peers; employed parents leave them alone the entire day...

We carry stones with us, and when we go to school, we drive the wolves away if we see them

UNICEF, *The Many Faces of Poverty*, Belgrade, 2004.

³⁶ This term has the same meaning as the term "poverty of the environment" (of the family environment, rural/urban dwelling, local community, region) used in the chapter on Poverty Reduction in Children in the PRSP for Serbia.

³⁷ NPA, p. 22.

Sometimes, it is only by means of data analysis at the municipal level that problems which can only be glimpsed at the national level are fully revealed:

- Infant mortality in some municipalities is significantly above average:
 - ♦ Among the least developed municipalities, some municipalities, such as Medvedja, Bojnik and Bosilegrad have an extremely high infant mortality rate (based on the level of average in the period 2002–2004, infant mortality rates are approximately 29, 20 and 15 per thousand live births compared to 9 for Serbia).³⁸
- There are significant differences in the coverage of children by education:
 - ♦ In the municipalities of Trgoviste, Medvedja and Presevo, three of the twelve least developed municipalities in Serbia, the net primary enrolment ratio is 10 percentage points lower than the republican average.
 - ♦ In the municipalities of Zagubica, Trgoviste and Tutin, another three of the twelve least developed municipalities in Serbia, the secondary school enrolment ratio is between 35.7 and 38.8 per cent (compared to 76.4 per cent in the Republic of Serbia).
- Analysis of the status of children in municipalities that have formulated LPAs shows:
 - ♦ In Kragujevac 95 per cent of children from MOP beneficiary families are not enrolled in pre-school programmes and the majority of children drop out of primary school or immediately after primary school.³⁹
 - ♦ In Sjenica there are 25 children registered with the Municipal Association for Assisting Children and Persons with Disabilities, while the Centre for Social Work has data on eleven. Some analyses show that this number is much higher (as many as 200 children with different types of disability)⁴⁰
 - ♦ In the municipality of Pirot one third of the children go to kindergarten, over one hundred children were rejected due to lack of space.⁴¹
 - ♦ A survey among children attending the special school 'Mladost' in Pirot shows that 70 per cent of the children are Roma, two thirds of the children live in families where parents are unemployed and without regular income and over one half in households with five or more members.⁴²

Children from isolated settlements

- In households with young children living in isolated settlements parents less often read to their children or play with them
- Shouting and physical punishment are more often used as forms of punishment
- The share of children going to nurseries and kindergartens is extremely low – only 9 per cent
- A significant number of parents (28 per cent) state that they have problems receiving adequate health care, mostly because these institutions are very far away

UNICEF, *Research on Family Beliefs and Care Practices*, Belgrade, 2005 (unpublished)

³⁸ According to the *Republic of Serbia Law on Underdeveloped Areas* (Official Gazette RS no. 53/95)

³⁹ The Kragujevac Centre for Social Work research findings covered more than 60 per cent of children of MOP beneficiaries, the City of Kragujevac, *Local Plan of Action for Children – Kragujevac fit for children*, p. 10.

⁴⁰ The municipality of Sjenica, *Local Plan of Action for Children – Sjenica fit for children*, April 2005, p. 21

⁴¹ The municipality of Pirot, *Local Plan of Action for Children – Pirot fit for children*, March 2005, p. 23

⁴² Ibid, p. 32

5.4 Child Labour

Few children in Serbia work. According to child poverty research findings in Serbia, primary school age children are normally dependents.

However, there are serious pockets of excluded children that require attention. In the age group 15 to 18, the percentage of children in the labour market, i.e. the average figure for those that are not included in the education system amounts to approximately 22 per cent. This percentage is significantly higher among poor (33.5 per cent) and especially Roma children (90 per cent).

Preliminary results from MICS3 show that ap-

proximately 4 per cent of children under 15 (7 per cent of Roma and 9 per cent of 20 per cent poorest) are involved in some form of work outside the household.

The UNICEF participatory research *The Many Faces of Poverty* reveals that many children living in villages assist their parents in working in the fields or tending cattle, meaning, as noted by the surveyor, that sometimes these activities prevent them from going to school, or even cause them to drop out. The research also shows that a number of children are begging or sell some products, sometimes black market goods.⁴³



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⁴³ UNICEF, *The Many Faces of Poverty*, Belgrade, 2004, p. 32



5

POLICY OPTIONS

1 At National Level

The first fundamental requirement in combating child poverty and exclusion is placing this objective high on the Government of Serbia's agenda. Economic development does not necessarily lead to poverty reduction, and it does not automatically benefit children. On the contrary, the countries in the Region, which are in transition to a market economy, are experiencing increasing disparities. Poor and excluded children have less access even to primary education. To avoid a new generation of uneducated, poor adults, inclusive policies that target specifically the poor and excluded children must be developed and implemented. In Serbia the excluded children are children of ethnic minorities, especially Roma children, poor children, children deprived of parental care, children with disability, and children victims of violence, abuse and neglect or trafficking and prostitution.

Improving the status of children will depend on the level of priority this objective will get among the numerous reform objectives of a

country in transition. Awareness and good data for evidence-based policy making and for monitoring the effects of these policies are urgently required.

Important laws and policies were developed over the last years. To implement them so that they reach the poor and excluded children (which are the most in need of these reforms), is perhaps the greatest of all the challenges. The **causes of exclusion** have to be identified through participatory research; **dialogue** between the excluded population, service providers, other stakeholders in the municipalities; and **mechanisms for inclusion**, that make it possible to break through the barriers of exclusion. Systems must become more inclusive and behaviour towards the excluded population and **capacities of service providers** must be enhanced. Services and service providers must be held accountable for the services they provide and for the inclusion of all children.

One of the key issues in combating child poverty and exclusion both at national and local levels is establishing multi-sectoral

coordination, cooperation detecting issues of concern related to children and they have to work together finding and implement solutions. In a period of transition, when numerous reforms are at the same time being implemented in different sectors, multi-sectoral cooperation is dysfunctional, thus presenting an obstacle to solving multidimensional issues. Thus, one of the priorities in combating poverty must be strengthening the role and importance of multi-sectoral bodies such as the Council for Child Rights and multi-sectoral councils at local level.

There are also challenges in the areas of creating budgetary space for reforms and special programmes for child inclusion, collecting required disaggregated data and developing and maintaining databases on poor and excluded

children, developing adequate control and M&E mechanisms, creating conditions for child participation and building awareness and capacities in the public administration and in the society for combating discrimination and exclusion.

In 2006, three years after the adoption of the *National Plan of Action for Children*, the time has come not only to review the progress made in achieving the goals set in the plan, but also to have them updated and strengthened in line with the changes that have occurred in the meantime.

In order to create a Serbia Fit for Children, crucial challenges in education, health care and social welfare/ social protection have to be addressed. They all require urgent action. **Childhood is an opportunity that does not come back.**

1.1 Education

National Plan of Action for Children II Priority: Quality Education for All Children

The National Plan of Action for Children strategic goals in the area of education are to:

- increase public spending for education;
- increase the proportion of children covered by preschool education, with special measures to include children from groups that are currently not enrolled in preschool;
- make certain that all children are covered by quality primary education;
- ensure that all children who complete primary education enrol in and complete secondary education and develop an

educational concept based on the human rights of children;

- make schools fit for children.

According to the *2005 Report on Poverty Reduction Strategy Implementation*, education reform has continued – primarily the revision of the education methodology and curriculum for lower grades.⁴⁴ Teacher training and education programmes have been implemented.⁴⁵ Also projects promoting Roma education have been supported, in line with the *Action Plan for the Promotion of Roma Education*, adopted at the beginning of 2005.

⁴⁴ Government of the Republic of Serbia, *First Report on Poverty Reduction Strategy Implementation*, Belgrade 2005, p. 68–72

⁴⁵ Training and education programmes for: active teaching methods; development planning for schools; foreign language teachers in lower grades; civic education; first grade teachers in applying descriptive grading; history teachers to introduce European approach to teaching history



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In mid 2005, the *Strategy of the Ministry of Education and Sports* for the period 2005–2010 was adopted.⁴⁶ Government has also adopted the *Law on Preschool Education and Upbringing*. In line with the NPA, pre-primary education has become compulsory as of the 2006/07 school year. All children of preschool age are obliged to attend pre-primary education for four hours per day for at least six months before enrolling in primary school. These programmes are compulsory and free of charge. If there are no preschool institutions in a child's place of residence, local government is obliged to organise transportation to the closest kindergarten or school where pre-primary programmes are organised.

The Draft Secondary Vocational Education Strategy is in parliamentary procedure. The implementation of this Strategy should lead to reorganizing the vocational education system in accordance with the needs of the economy. There are plans to determine the levels, character and duration of vocational education and training in Serbia in accordance with the 1997 International Standard Classification of Education (ISCED).⁴⁷

Preparatory activities have begun for projects that seek to develop the capacities of schools and teachers in the areas of democratisation and decentralisation of education, such as: inclusive education, prevention of trafficking, protection of child rights (child ombudsman), prevention of anti-social behaviour in schools, creating a safe and enabling school environment. Preparation of an *Education Strategy for Persons with Special Needs is under way*.

The share of the GDP expenditure in 2005 for education was 3.9 per cent. According to

the *National Investment Plan* for 2006–2007, recently adopted by the Government of the Republic of Serbia, an investment of approximately €55 million is planned for education at all levels. The majority of the funds will go for construction and reconstruction of schools and school equipment (over €32.5 million), for purchasing PCs (€12.6 million), for teacher education and training (€2 million), for building sports playgrounds and gyms (€7.5 million).⁴⁸

The efforts made during the last years, although progressing in the right direction, have not managed to address numerous challenges in the area of education, such as inclusion of children from marginalised groups, of children living in remote rural areas, and of children with disabilities. Research presented in this Report shows that poor children, Roma children from Roma settlements and children from isolated settlements attend preschool less frequently and are to a lesser extent covered by primary education. Preliminary MICS3 results show that **over 90 per cent of the poorest and 96 per cent of Roma children are not covered by preschool education. Only 13 per cent of Roma children complete primary school.**

⁴⁶ Republic of Serbia, *Strategy of the Ministry of Education and Sports* for the period 2005–2010, Belgrade, May 2005.

⁴⁷ Bulletin on the PRS Implementation in Serbia – Ministry of Education and Sports: *More Educated are Wealthier*, Bulletin No. 6, April, 2006.

⁴⁸ Republic of Serbia, *National Investment Plan for the period 2006–2007*, p. 73.

Among the poorest population groups, less than two thirds attend secondary school, while among the Roma children from Roma settlements only 4.8 per cent of girls and 12.2 per cent of boys go to secondary school. Lower education coverage is also evident in certain under-developed municipalities. Children, who must

walk long distances to school, sometimes more than 10 kilometres, are in a particularly difficult situation. Research also indicates lower education coverage of children with disabilities and points to resistance to their inclusion in regular schools. Both Roma children and children with disabilities are discriminated in school.

MAIN CHALLENGES

- Ensure full coverage of poor children, Roma children and children in remote areas in preschool and primary education, and facilitate extended education of these groups
- Raise awareness among teachers and parents on early child development
- Develop intercultural education, as essential for learning and intercultural understanding to combat discrimination of some children
- Tailor education with the needs, potentials and interests of the children, as a precondition for inclusion of all children in education processes and for decreasing drop-out
- Optimise school network, empower teachers and improve work conditions and quality of education in small rural schools
- Create tailored programmes for including children that drop-out of school
- Hold central and local governments and teachers accountable for inclusion and good learning among all children
- Ensure participatory monitoring of school performance and learning

Education is a key area for breaking the inter-generational cycle of poverty and exclusion. Among the poor, the majority come from families with adult members who have no educational background. These children are also those who less often attend preschool and more often drop out of school, particularly after completing primary education. The attendance figures are even less favourable for Roma children. Children with disability are also to a large extent excluded from the education process. How much have implemented reform activities in the education sector really contributed to the inclusion of all children into the education process?

Firstly, there is a risk that poor and excluded children will not be covered by compulsory preschool education in the year preceding primary school although it is precisely these

children who are the most in need to get better prepared, since often in comparison to their peers they do not have adequate learning support within the family.

Secondly, it is not enough for excluded children to start preschool institutions just **before entering primary school**. Inclusion of these children into a preschool at an early age can help them to better prepare for school providing them with equal chances as other children. This is especially important for those children who have not Serbian as their mother tongue. Preschool is also a good place to introduce inter-cultural learning and understanding between the different children and their parents.

Thirdly, it is unclear how attendance of young children from **remote and isolated settlements** will be ensured pre and primary education. Is it

realistic to expect that poor local governments will be able to fulfil their obligation to secure transportation for children to a preschool?

These challenges indicate the need to target poor children, children of ethnic minorities and children living in remote areas and ensure they will benefit from a good quality preschool. A key intervention that would have multiple effects of inclusion would be the implementation of an ambitious plan to include 80% of excluded children in preschools within 3 years.

In the area of primary education there is an urgent need to improve the quality of education introducing interactive teaching methods that tailor education to the needs, potentials and interests of the child. This is one of the preconditions for the inclusion of all children also children with disabilities into the education system and for decreasing drop-out. Optimizing the school network and improving work conditions and education quality in small rural schools is needed to enable access to education programmes to all population groups.

Allocation of over €55 million from the *National Investment Plan* for 2006–2007 for investment in and equipment of schools gives hope that in the next two years the disadvan-

tage of poorer municipalities will, at least in part be assuaged.⁴⁹

Yet another challenge is the development and implementation of tailored programmes for including children that drop-out of school that would give them another chance to continue school or to enable them to acquire qualifications for their first employment – these programmes need to be separated from programmes for adult education. This issue has so far not been part of education reform efforts.

Finally, an important task is also the reform of secondary education so that it will truly open up employment opportunities on the market. Special scholarship programmes are needed for poor and excluded children who have managed to reach this level, without which an increased coverage of excluded groups with secondary education cannot be expected.

In order to cover all children with quality education it is not enough to adopt relevant laws. States that have ratified the *Convention on the Rights of the Child*, such as Serbia, have a commitment towards all children in the country and must implement reforms more decisively, and ensure that all poor and excluded children get access to their right to education.

⁴⁹ Republic of Serbia, *National Investment Plan for the period 2006–2007*, p. 73.

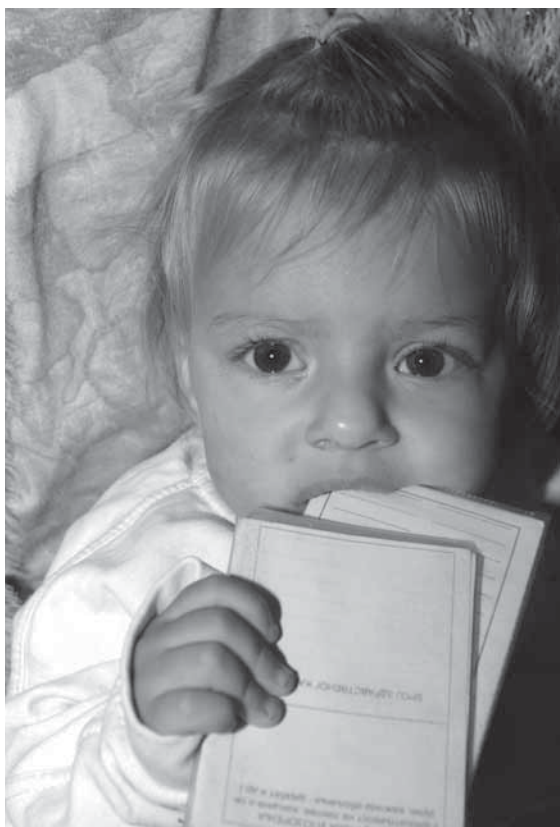
1.2 Healthcare

National Plan of Action for Children

III Priority: Better Health for All Children

The National Plan of Action for Children defined the strategic goals in the area of healthcare as:

- enabling a healthy and safe onset of life for all children,
- providing optimal conditions for the development of every child and
- promoting health among young people and adolescents.



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According to the *2005 Report on the Implementation of the Poverty Reduction Strategy*, the adoption of the health policy document *Vision of Health Care System Development, Strategy of Health Care Reform* – together with the *National HIV/AIDS Strategy, Public Health Strategy, Programme of the Protection of the Population against Tuberculosis* and many other policy documents should lay the ground for improvement of availability of health care, particularly for excluded population groups, and reduce inequality in access.⁵⁰ Activities have also continued on restructuring health care centres, the development of basic health benefit package, introducing new methods for financing service providers, the development of a public health information system. *The Strategy for Improving the Health of Young People* has been prepared and an expert group on youth is working on improving the quality of existing youth counselling centres and expanding the initiative to new centres.

Towards the end of 2005 the new *Health Care Law* was adopted. Article 25 of the Law stipulates that ‘every child under 18 years of age has the right to the highest possible healthcare and health protection standard.’⁵¹

In line with the *National Action Plan for Improving the Health Status of the Roma Population* 30 projects have been identified for improving the health status of the Roma population.⁵²

The National Strategy for the Prevention of Substance Abuse and an *Action Plan* have

⁵⁰ Government of the Republic of Serbia, *First Progress Report on the Implementation of the Poverty Reduction Strategy in Serbia*, Belgrade, 2005, p. 64–67.

⁵¹ *Health Care Law*, “Official Gazette of the Republic of Serbia” 107/2005.

⁵² The projects include those promoting dental care of Roma children, vaccination of children not previously covered by this programme or those children that are not registered in health care centres, treating parasitic and communicable diseases (Bulletin on the PRS Implementation in Serbia – Ministry of Health: *Selected projects aimed at securing and promoting Roma health care*, Bulletin No. 7, 2006, p. 6).

been formulated and are in the phase of public debate.

The Ministry of Health and the Republic Health Insurance Fund have supported *Immunisation of Marginalised Children* project that should cover over 35,000 unvaccinated children. Furthermore, there is ongoing cooperation on the *Programme of Home Visits* through which trained patronage nurses identify the most vulnerable households and supporting their inclusion into the health and social welfare systems.

The share of health care expenditure of the GDP in 2005 has increased to 7.9 per cent. According to the *National Investment Plan*, in the period 2006–2007, more than €300 million will be invested in health care. Investments of over €60 million are allocated for reconstructing health care centres.

Reforms in the area of healthcare are advancing and are gradually leading to changes in the system that aim at providing access to basic health services of an appropriate quality without financial barriers for the whole population.

The health status of children and some health indicators call for the need to strengthen the focus on children. Infant mortality rates are still significantly above the European average and are exceptionally high in some municipalities and among Roma children. The under five mortality rate is also too high and requires more attention. There are still children that have not been vaccinated, children without health insurance, malnourished and obese children.

Research presented in this report show that the share of malnourished children is above average in the poorest population groups and particularly among Roma living in Roma settlements. In both these groups, children are more affected by chronic disease, while Roma children are also

falling behind in motoric development. Low birth weight and stunting are key indicators to measure the nutritional status of children. In accordance with MICS3 survey, it is more than **three times** as common with low birth weight among children in the 20 per cent poorest families as it is in the national average. Among Roma the prevalence is almost **six times** higher than the average. As for stunting, measured when the child enters school, **twice** as many among the 20 per cent poorest and almost **four times** as many Roma children are stunted compared to the national average.

We can see that the disadvantage of the poorest and Roma children increases when they grow older. The system has failed to detect and support these children on time.

Low birth weight is often an indication of nutritional deficiencies of the mother during pregnancy and before. A UNDP survey in South East Europe of September 2004 on availability of food showed that **the majority of Roma (53%) reported going hungry in the previous month**, compared with only 7% of non-Roma living in close proximity to Roma settlements.⁵³

Problems related to lack of registration, lack of health insurance, inaccessibility of over the counter medication and unsanitary living conditions are factors that have a dire effect on the health status especially of Roma children. The preliminary MICS3 survey results show that **infant and under five mortality rates are three times higher among Roma children** than in the general population in Serbia.

In order to truly fulfil international commitments made by ratifying the *Convention on the Rights of the Child*, under which all children have the right to the highest possible health and health care standard, main health challenges must be addressed.

⁵³ UNDP, *At Risk: Roma and the Displaced in South-East Europe*, 2006, p. 57.

MAIN CHALLENGES

- Ensure full inclusion of children in the health care system, particularly poor and Roma children, children with disabilities and children living in remote areas
- Decrease infant and under five mortality, especially of Roma children
- Increase access to medication, especially for poor and excluded children
- Ensure earliest possible detection of disabilities, guarantee follow up and support to parents and the development of their capacities
- Improve early child development and child nutrition, decreased number of malnourished and obese children
- Hold central and local governments and health providers accountable for inclusion and good health services for all children
- Ensure participatory monitoring of health
- Raise awareness among youth of reproductive health and use of condoms and of risks related to abuse of tobacco, alcohol and drugs
- Continue the healthcare financing reform without compromising access to basic healthcare services for the excluded children
- Secure adequate budgetary funding for people not covered with health insurance

Despite the adoption of numerous strategies and laws, there is evidently a need for making a shift from legislation to implementation. To reach excluded children, refugee, IDP, Roma and poor children, children in isolated settlements and children with disabilities, the different causes of exclusion have to be identified as well as possible mechanisms for inclusion that make it possible to bridge the barriers that hinder full access. Services and service providers must be held accountable for the quality of service they provide and for the inclusion of all children and participatory monitoring mechanisms must be set up and implemented. It is, for example, unacceptable that children are denied treatment because they do not have health insurance or that some children have not been vaccinated against the basic childhood diseases. It has been proven that these problems can be solved through scaling-up already piloted interventions in the area of immunisation of marginalised children and home visitation.

Special focus needs to be given to programmes on young children living in poor and excluded families, where most of the health indicators are much worse than in the general population. Improving

knowledge and skills on adequate nutrition and care and on early childhood development is needed foremost among parents, but also among service providers and the general population.

Early detection of disabilities and follow up and support to their parents from birth or from the detection of the disabilities can help to more effectively develop capacities and compensate disabilities from childhood. Improved healthcare for all children is one of the accepted international obligations of Serbia, this obligation can not be fulfilled with the existing level of coordination between the sectors; health, education and social welfare as well as central and local governments. Early detection, coordination as well as healthcare for children with disabilities must become a priority and improve considerably.

Formulating and implementing specific programmes supporting targeted, evidence-based interventions that focus on the most excluded require participation of the poorest and local NGOs in health service design and functioning, particularly at the local level. Furthermore, the results of improved healthcare cannot be mea-

sured without adequate participative monitoring and (public) reporting systems sensitive to the issues of excluded, so that the national averages do not conceal the excluded.

Finally, in order to secure healthcare of excluded children, the national budget must allocate ad-

equated resources for persons not covered by health insurance. It is of extreme importance that the criteria for distribution of €300 million which will be invested in 2007 in healthcare through the National Investment plan take into account the priorities defined in the NPA and that they give priority to children's healthcare needs.

1.3 Social Welfare

National Plan of Action for Children

I Priority: Poverty Reduction in Children

IV Priority: Improve the Position and the Rights of Children with Developmental Difficulties

V Priority: Protecting the Rights of Children deprived of Parental Care

VI Priority: Protection of Children from Abuse, Neglect, Exploitation and Violence

The National Plan of Action for Children defines the following strategic goals and objectives in the area of social welfare:

- **Reduce poverty in children as part of the PRSP of the Government of Serbia,**
 - ◆ Provide help to individual families and categories of children living below the poverty line
 - ◆ Improve the accessibility, quality and efficacy of social services for children
 - ◆ Develop a systematic, long-term prevention and development strategy
- **Improve the position and the realisation of the rights of children with developmental difficulties and create opportunities for them to participate equally in society,**
 - ◆ Raise awareness about their; rights, needs, potentials and contributions and develop an environment that would enable them to participate equally in society.
 - ◆ Secure comprehensive and high quality health care, rehabilitation and education
- ◆ Define a National Strategy and legal framework for the protection of the rights of children with developmental difficulties in compliance to international standards
- **Improve the protection of children deprived of parental care through reforms in the social protection system,**
 - ◆ De-institutionalisation of child protection along with a gradual switch to other reforms of protection that encourage living in a family environment
- **Establish a comprehensive system of protection from abuse and neglect that will provide protection for children that is based upon the principles of the *Convention on the Rights of the Child* and in particular the general principle of protecting the best interests of the child,**
 - ◆ Raise awareness, improve the knowledge and establish a comprehensive system of protection from all kinds of abuse, neglect, exploitation and violence.



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The first goal of the *National Plan of Action for Children* is reducing child poverty. In part this goal will be realised through social welfare by providing benefits to families with children suffering from poverty (social assistance and child allowances) and by preventing the effects of poverty by intervening in communities.

According to the *2005 Report on the Implementation of the Poverty Reduction Strategy* the following has been achieved:⁵⁴ increased coverage of the poorest households in the least developed municipalities with cash benefits, and increased allowances for persons with disability.⁵⁵ Furthermore, the process of transformation of institutions and promotion of alternative forms of social welfare services has been continued, especially the promotion of foster care for children deprived of parental care. *The Social Innovation Fund* has funded local level projects that develop and test innovative and more effective forms of social welfare services in partnership with non-government organisations.⁵⁶

The *Family Law* was adopted. This law treats for the first time family violence as a social problem, defines protective measures for family members against the perpetrators of violence, introduces new legal provisions such as emancipation of minors over the age of 15, mediation in marital relations, and joint parental rights. Concurrently, the *General Protocol on Protection of Children from Abuse and Neglect* and the *Special Protocol on Protection of Children in Social Care Institutions from Abuse and Neglect* were adopted.

In 2006, both the Criminal Code, which defines domestic violence as a criminal act, and the Juvenile Justice Law were passed. These two laws should enable further development of the legislative framework in this area and harmonisation with international documents that relate to protection against violence.

During 2006 the allowance for carers of persons with 100 per cent physical disability was significantly increased.⁵⁷ This is also meant to cover carers of children.

The newly adopted *Social Welfare Development Strategy* defines the main components of the social welfare reform: deinstitutionalisation, decentralisation and democratisation of the social welfare services. The Strategy also defines groups in need of special types of support. Together with the elderly and disabled persons, the following groups of children are identified as excluded: children deprived of parental care, children in conflict with the law and children victims of abuse, violence, exploitation and neglect.

⁵⁴ Government of the Republic of Serbia, *First Progress Report on the Implementation of the Poverty Reduction Strategy in Serbia*, Belgrade, 2005, p35–39

⁵⁵ The adoption of the *Amendments and Additions to the Law on Social Welfare and Social Security of Citizens* introduced a unified minimum social security level as a criterion for receiving social assistance (cash benefits). These changes in legislation significantly increased caregivers' allowances from 2 600 Dinars to 4 500 Dinars (the number of children beneficiaries is approximately 5 000).

⁵⁶ Since 2003 the SIF financed 139 projects amounting to 3.6 million € in 70 municipalities throughout Serbia (Bulletin on the implementation of the PRS in Serbia Social Innovation Fund: Improving the life of children with disability, bulletin no. 6, April 2006, p. 3).

⁵⁷ The new *Amendments to the Law on Amendments and Additions to the Law on Social Welfare and Social Security of Citizens* increased to 14 000 Dinars.

Poor children, despite their parents' poverty, can access services providing all costs are covered by authorities. A well functioning social welfare system with well defined and well targeted social assistance and child allowance schemes is very important in this context."

Social welfare/ social protection, can play a significant role:

- in raising public awareness of the rights of excluded children, providing resources and creating an environment required to develop their capacities and participate equally in society;
- in creating a comprehensive system for protecting children from abuse, neglect, exploitation and violence, supporting dysfunctional families and primary care in a family environment;
- in protecting children in conflict with the law and their possibility to a second chance.

Many challenges, however, still remain in the area of social welfare – challenges that are key for the inclusion of poor and excluded children. Research presented in this Report indicate the exclusion particularly of: poor children, Roma children living in Roma settlements, children with disabilities, children victims of abuse, neglect, exploitation and violence and children living in residential institutions. For improving the position of these children, the reform of the cash benefits system is of special importance as it would secure financial support to meet the minimum living standard and improve their access to services.

Children with disabilities are not only excluded from the healthcare and education system, but they are also exposed to **isolation and non acceptance** by the community. Parents of children with disabilities are often left alone without adequate support from government.

Lack of adequate social welfare services at local level to support poor or dysfunctional families, or to provide good quality foster family services often lead to **institutionalisation**, which deprives the child of the right to grow in a family environment and leads to decreased chances for development of the child. Institutionalisation is still significantly present as a form of child protection. This form of care is particularly harmful for young children who grow up without the necessary care and educational and social support and without adequate psycho-social stimulation.

Finally, research shows that in Serbia **corporal punishment** of children is still present in both the family and in schools, and that other forms of **violence** are also frequent. Interfering in inter-family relationships is still considered unacceptable, and it seems that there is still insufficient **public pressure and condemnation** of 'disciplining' children. A significant number of children are exposed to violence from peers, but also to violent behaviour from teachers.

In the area of *cash benefit*, systematic changes should be directed at increasing the coverage of the poorest and redefining social assistance (MOP) that in the current system discriminate against multimember households.

Other crucial issues that need to be addressed for an improved coverage of the poor are: improved information on social entitlements; regular presence of social workers in the field and providing access of families without identification documents to social welfare (particularly Roma, refugees and IDPs).

Child allowance aimed at poor families with children, is another important programme. It is especially important for protection of poor children in multimember households. Graph 3 page 18 shows that families with 3 children and more are highly vulnerable to poverty. This programme does also require much better targeting.

MAIN CHALLENGES

- Redefine social assistance (MOP) that discriminates against multi-member families, improve targeting of poor families receiving child allowances and ensure the excluded population is informed about social entitlements
- Provide access to social welfare also to families without the necessary identification documents, especially for Roma, refugees and IDPs.
- Strengthen outreach service and identification system so all families and children in need of support are covered
- Develop and implement alternative forms of social welfare services, particularly for the protection of children in the family environment and for protection of children from abuse, neglect, exploitation and violence
- Move children out of institutions giving urgent priority to infants and children under 3 years of age
- Ensure local governments provide, in close coordination with the beneficiaries, good quality social welfare services in their mandate, such as day care centres for children with disabilities, home care, assistance, etc.
- Develop control mechanisms as a precondition of decentralization of social welfare services and to hold central and local governments and social workers accountable for inclusion and good services.

Data on targeting show that almost **half of the poor children do not receive child allowance and that 19 per cent of children from the richest families receive this entitlement.**⁵⁸ It is evident that the system needs to be improved in order to include the poor and discontinue the transfer of funds to children from better-off families.

There are suggestions to consolidate social assistance (MOP) and child allowances. This has to be carefully reviewed.⁵⁹ Any changes in the provision of social assistance (MOP) and child allowances must ensure that poor children have full access to services as the highest priority. The existence of child allowances as a separate measure shows a clear priority of protecting poor families with children. Consolidating these two types of entitlements could jeopardise the priority that poor families with children are given under the current system.

One of the priorities in the development of alternative social welfare services should be to accelerate and support the transformation of residential institutions for children without parental care and those with disabilities, with urgent deinstitutionalisation of children 0–3 years of age. The damaging consequences for life caused by growing up in residential institutions are clearly documented and need to be given the highest priority of government activities. Apart from developing and strengthening foster care, opening day-care centres for children with disabilities and developing efficient gate keeping mechanism that will prevent future placement of children into institutions, it is also important to create a network of services for children at community level in order to enable children to grow up in a family and family like environment.

Development of good social services related to the protection of children requires the estab-

⁵⁸ UNICEF, *Survey on Child Poverty on the Basis of Existing Data*, Belgrade, 2005, (unpublished)

⁵⁹ World Bank, Ministry of Labour, Employment and Social Policy, *Serbia social assistance and child protection note*, June 2006.

lishment of links and multi-sectoral cooperation of social welfare, education, health, and when required of the police and judiciary for identification, reporting, referral and to provide adequate response. Of equal importance is the development of consolidated databases at all levels, sensitisation of the general public on the specific issues, education of professionals and the general public on children's rights and how to recognise and react in situations of discrimination, violence, abuse etc. There is also a need to complement with necessary legislation. An independent Ombudsman for Children is urgently required to oversee the respect of child rights in general and especially of excluded children and a Code for Children will help to identify gaps in the legislation and will provide easy access to all child right related legislation.

A precondition for the further decentralisation of social welfare services is finding a mechanism that will ensure that local governments

2 At local level – Local Plans of Action for Children (LPA)

Among the different measures, activities and projects at local level, particular attention should be given to the development of LPAs for children, as a means of increasing awareness of the situation especially of excluded children and for advancing the status of children through systematic and long-term effort of the entire local community.

During 2005 LPAs for children were formulated in three municipalities – Kragujevac, Sjenica and Pirot. In 2006 additional 13 municipalities – Kanjiza, Senta, Valjevo, Koceljeva, Krusevac,

provide the services they are responsible for. According to available data, the majority of the municipalities do not have, for example, day care centres for children with disability, although the local governments are legally bound to establish them. The development of the kind of alternative services that provide support to the natural family at the local level is one of the important preconditions for deinstitutionalisation.

The development and implementation of participatory monitoring mechanisms, at central and at local level is important to ensure a successful decentralisation process and good quality services for all children and families, especially those who are now excluded. It is also necessary to define standards for service provision, establish a system of accreditation and licensing and to further build the capacity of social welfare system workers.

There is nothing more pressing or more urgent in these hard times than improving the quality of life of children

Mr Vladan Vasic, Mayor of Pirot

For the first time, practically the entire municipality has given it's support to one document

Dr Esad Zornic, Mayor of Sjenica

Lebane, Bela Palanka, Prokuplje, Vranje, Prijepolje, Priboj, Nova Varos, Ljubovija started to prepare their plans.

In the process of developing LPAs, the municipalities examine the situation of local children and families in detail, identify excluded children and the causes of their exclusion and draw up concrete development plans using local resources for the benefit of children and the

⁶⁰ DevInfo - software to process integrated data

development of human capacities in their municipality. They also establish systems to monitor progress for children through DevInfo⁶⁰ accessible also to the community. Local DevInfo databases will help municipalities and communities monitor the impact of policies, multi-sectoral strategies and specific local initiatives.

The LPAs define the most important objectives, policies and activities that need to be implemented between 2005 and 2010 that would result in improving the position of all children and young people in these municipalities.

Essentially the LPAs are complementary with the *National Plan of Action for Children* and the *Poverty Reduction Strategy*.

One of the significant outcomes of the LPAs is the establishment of multi-sectoral bodies at local level. Cooperation between different institutions, the NGO sector and the local governments is a precondition for improving the status of children. One of the significant outcomes of the LPAs is the establishment of multi-sectoral bodies at local level. Cooperation between different institutions, the NGO sector and local government is a precondition for improving the status of children. Priority is given to capacity building of municipal teams to carry out assessment, collect and analyse data and monitor implemen-

tation. The plans are adopted by the municipal assemblies and funds are allocated for LPA development and its implementation. This not only gives the plans legitimacy, but also 'sustainability of local policies for children.'⁶¹

In addition to those defined in the NPA, the identified priority areas in policies for children in some municipalities include other areas: improving information on children and for children, improving cultural services for children, the development of sports and decreasing child dissocialised behaviour.

Depending on the local specificities of each municipality, the LPAs include certain objectives and activities that are not defined as national priorities or are less significant in national terms, but nonetheless important at the local level. Thus, for example in Sjenica municipality, a specific objective in the education sector is 'providing organised transportation for pupils walking long distances on foot to school'. In Sjenica, the distance to school was identified as a mechanism of exclusion while developing the situation analysis for children, which was completed with broad participation of the population, municipal representatives, and the services. To solve the problem of inaccessibility of schools, the plan is to procure vehicles such as mini-buses, vans, motor sledges, etc. for children who travel more than 3 km.

In the municipality of Sjenica private donors provided the first buses for pupils walking long distances by foot to get to school.

My name is Mirza. I'm 12 years old and I am in sixth grade. Until last winter I used to walk more than 8 km to school and my feet were always frozen. This winter my feet have been exchanged for a bus. Bus tires don't freeze.

Republic of Serbia PRS implementation unit, *Buses for pupils crossing long distances on foot to school in Sjenica*, Bulletin No. 6, April 2006, p. 3.

⁶¹ Municipality of Sjenica, *Local Plan of Action for Children – Sjenica Fit for Children*, April 2005, p. 8

Also in Sjenica municipality disability was identified as another issue related to exclusion when the LPA team identified 200 children with disabilities (most of them hidden in the home) during the process of developing the situation analysis of children. Previously, Sjenica municipality had registered only 20 children with disabilities. The ‘timely detection of anomalies in children and timely prevention and intervention’ is now defined as an objective in Sjenica.⁶²

The municipality of Pirot defined ‘monitoring the progress and implementation of LPA for children’ as one of its priorities. To this end, a municipal monitoring team has been established to submit progress reports every six months to the municipal assembly and to inform the general public on implemented activities. The DevInfo data base is used as a reporting system.



Concluding Remarks

Several important steps have been taken to improve the status of children in Serbia. Many issues, that for decades were taboo and therefore could not be addressed, have been placed on the public agenda. There are, however, still many issues that are unresolved and the many laws that have been passed must now be implemented.

Research on child poverty and exclusion shows that combating poverty requires a two-pronged approach:

- a) a general approach – improving the status of all children in accordance to the *Convention on the Rights of the Child*, setting children as a priority; and
- b) a specific approach – aiming at the inclusion of the excluded, children living in poverty, in remote and isolated areas, children of ethnic minorities.

The Rights of Children must be widely known, understood, accepted, respected and guaranteed. Children are rights holders; they are born with their rights, rights that cannot be given or taken away. The failure is when rights are not respected. We are all duty bearers: individuals, society, government and its institutions, service providers and the private sector. We must fulfil our duties towards children. These are basic Human Rights principles which have to be made known to everybody.

⁶² Municipality of Sjenica, *Local Plan of Action for Children – Sjenica Fit for Children*, April 2005, p. 37

For inclusion of excluded children, refugee, IDP, Roma and poor children, children in isolated settlements and children with disabilities, the different causes for exclusion have to be identified and mechanisms that make it possible to bridge the barriers hindering access to services have to be established. Services and service providers must be held accountable for the quality of service they provide and for the inclusion of all children. It is also important that participatory monitoring mechanisms must be set up and implemented.

In 2007, four years after the adoption of the *National Plan of Action for Children*, the time has come not only to review the progress made in achieving the goals set in the plan, but also to have them updated and strengthened in line with the changes that have occurred in the meantime.

Strategic short, medium and long term measures and activities, clear deadlines and additional budgetary resources better targeted at excluded groups are required. In formulating these measures, several facts have to be borne in mind. Exclusion of children starts often before they are born with the poverty and exclusion of their parents, and if inclusive measures are not introduced the level of exclusion tends to increase while the child is growing older.

Poor and excluded children should always get preference when defining the budget and when developing reforms, especially reform of the social sector, to ensure that children have access to their rights, good health and good education.

Early child development and education are keys to break out of poverty and exclusion. A good example of an urgent short term measure that would have multiple effects on exclusion would be to set the highest target possible (80%) of **excluded children getting access to preschool within 3 years from now**. If these children would thereafter get access to a good quality primary school, this could open new opportunities for thousands of children to get a good education and be better prepared to contribute to the future of Serbia in few years from now.

Childhood is an opportunity that does not come back.



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Annexes

ANNEX 1	
BASIC DATA ABOUT CHILDREN IN SERBIA	59
ANNEX 2	
TABLES	69

1

BASIC DATA ABOUT CHILDREN IN SERBIA

Population

On the basis of the 2002 Census, Serbia has 7 498 001 inhabitants, i.e. 2 521 190 households.⁶³ It covers a territory of 77,474 km².⁶⁴

The urban population constitutes 56.4% of the total population (or 4.23 million). Serbia comprises 165 municipalities, but is often informally divided into three territorial regions, which differ considerably in terms of historic, social and economic characteristics: Vojvodina, i.e. the northern part of Serbia (2.03 mil. inhabitants), Belgrade (1.58 mil. inhabitants) and central Serbia (3.89 mil. inhabitants).

Another division that is also being used is: Vojvodina, Belgrade and four regions within central Serbia: Eastern, Western, Central and South-eastern Serbia. The biggest cities in Serbia are Belgrade, Novi Sad, Niš and Kragujevac, of which only Belgrade has more than a million inhabitants.

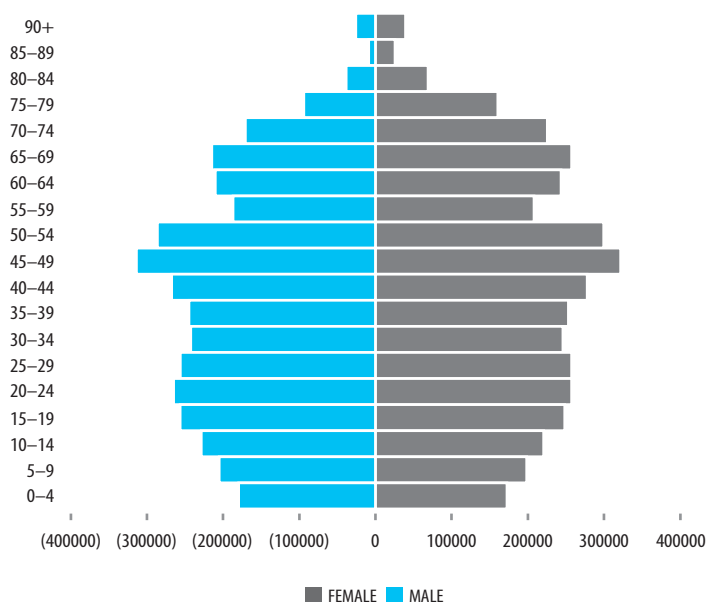


⁶³ Excluding Kosovo (currently under United Nations administration)

⁶⁴ Ibid.

Population pyramids – inequality – by 5 year intervals

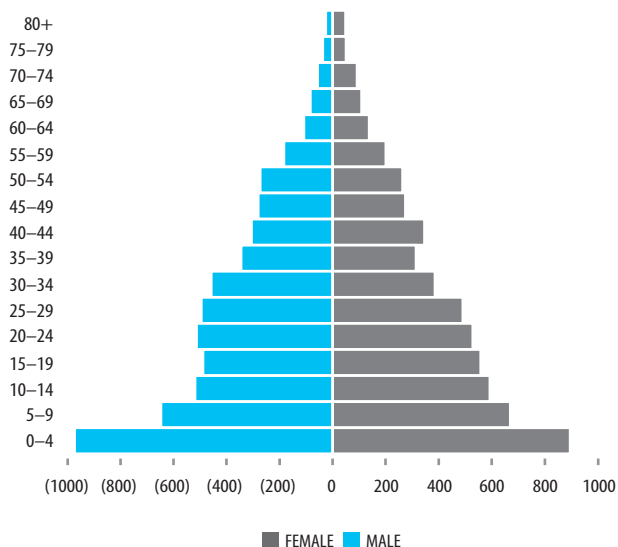
Total population in Serbia, Census 2002



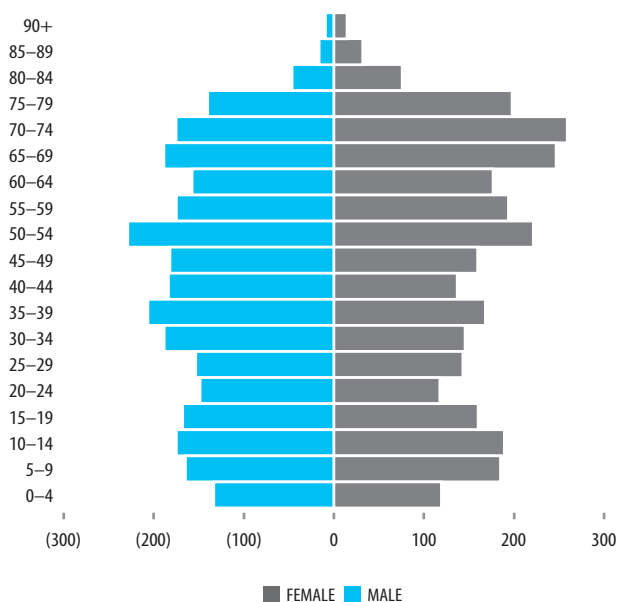
Some 1.47 million inhabitants of Serbia are children under the age of 18, of which 342,000 are children under the age of 5. Children under the age of 18 constitute 19.6 per cent of the population. There is a steady downward trend in under-18 share of the total population, indicating an aging population.

Comparing the age pyramid that refer to the whole population with that for the 20 percent poorest (Roma population not included), the profiles are similar. They reflect a negative population growth, with a shape like an onion, similar to the pyramids for countries in Western Europe. However, the pyramid for Roma in Roma settlements gives a completely different picture – with a strong population increase, similar to those in the poorest countries in the world.

Roma in Roma settlements, MICS3 survey, 2005

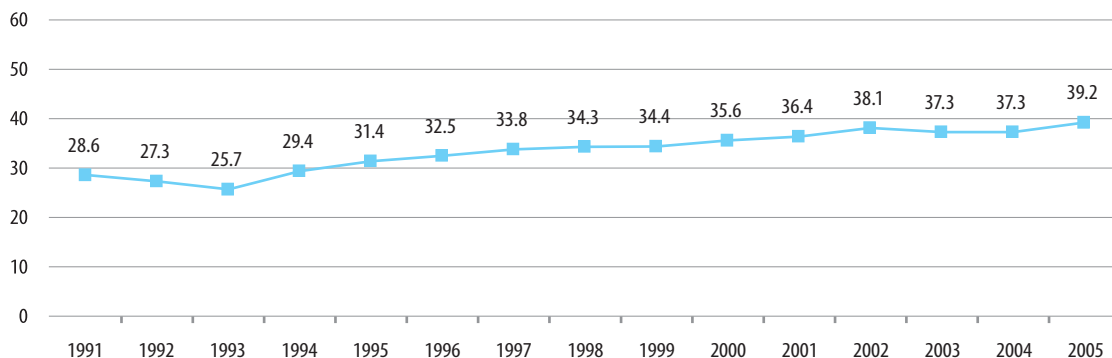


20% poorest, non Roma, MICS3 survey, 2005



Education

Graph 1 Children enrolled in preschool education (3 to 7 years)

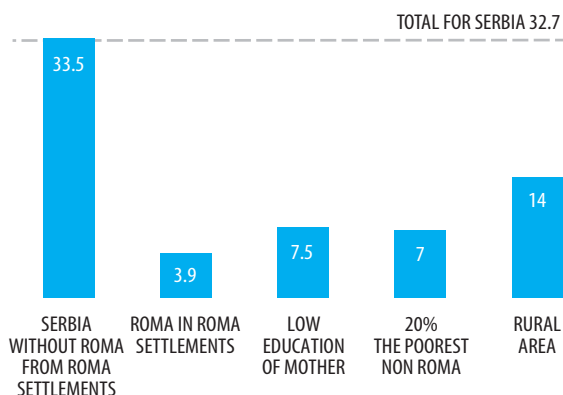


Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

Preschool education – Enrolment in preschool education is very low, reaching only 39.2 of the children in 2005 and with very little increase since 1991 (Statistics of education). In some other countries in transition it exceeds 70 per cent (Bulgaria and Romania). However it is close to some of the countries of former Yugoslavia. (TransMonee).

The average data, however, conceals the problems that can be noticed when particular groups of children are observed. Enrolment into preschool is significantly lower in rural areas, among the poorest and especially among Roma children. There is a strong correlation between the level of education of the mother and the success of children in school. It is therefore of high concern to note that children with low educational background have especially poor access to a preschool in Serbia. Those children who are most in need of a good preparation for school are those that are given less access. A good preschool is a precondition for these children to be able to succeed.

Graph 2 Children enrolled in preschool education (36 to 59 months)



Source: MICS survey 2005. Indicator ED1. Percentage of children aged 36–59 months currently attending early childhood education

There are different figures for enrolment in pre-schools. The LSMS survey conducted for the *Poverty Reduction Strategy* in 2002 got 43%. The figures are not comparable since this survey did not include Roma population and Internally Displaced People. It is possible, however, to note how the distance to the preschool influences enrolment. As per table 1, it is clear that enrolment in pre-schools is highly influenced by the distances for the children to the preschool.

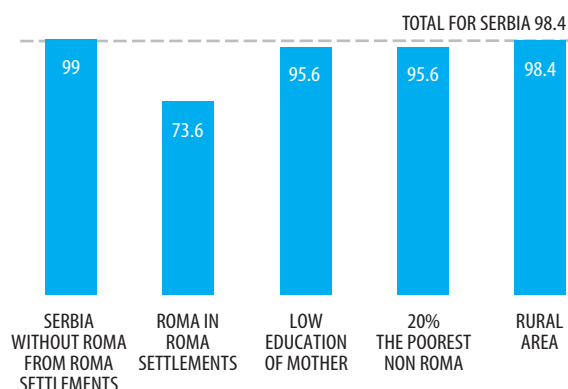
Table 1 Children enrolled in preschool education (from 3 to 7 years) by distance of preschool education institutions

	Total	Distance from preschool institutions (km)			
		Up to 0,5	0,51–1	1,01–5	5 and more
Preschool attendance	43%	67%	57%	35%	18%

Source: LSMS survey, 2002.

Primary school education – In 2005, 95.6 per cent of children were enrolled in primary school (DevInfo). From 1991 on, this percentage has been high and does not lag behind that of other transitional countries in the region. MICS3 findings show no significant differences in primary school enrolment of children from rural areas, children whose mothers' have a low level of education, and the 20 per cent poorest children. This indicates that parents are highly motivated to enrol their children in school. Roma population manages also relatively well, despite difficulties related to lack of registration and complicated enrolment procedures. However, considering that Roma in Roma settlements is the only population group with a high population increase, it would be desirable that more Roma children have access to their right to education, to have a chance for a better future. For if these children are not given access to primary school, the education figures for Serbia might decline.

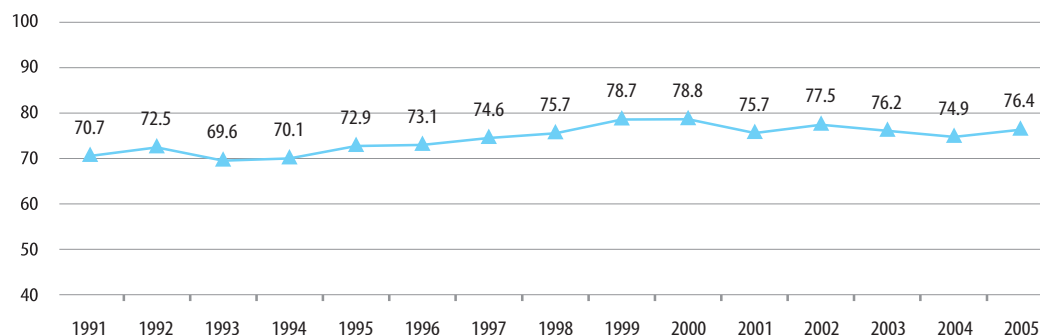
Graph 3 Net primary school enrolment ratio⁶⁵



Source: MICS survey, 2005.

Secondary school education In 2005, 76.4 per cent of children were enrolled in secondary school (DevInfo). There is a slight upward trend of children enrolled in secondary school during the period 1991–2005.

Graph 4 Net secondary school enrolment ratio⁶⁶

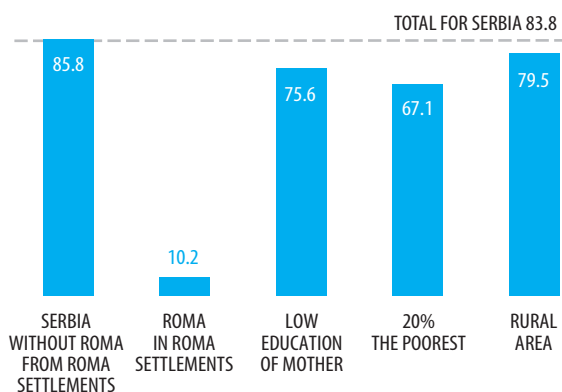


Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

⁶⁵ The number of children enrolled in primary school that belong to the age group that officially corresponds to primary schooling, divided by the total population of the same age group.

⁶⁶ The number of children enrolled in secondary school that belong to the age group that officially corresponds to secondary schooling, divided by the total population of the same age group.

Graph 5 Net enrolment ratio in secondary education

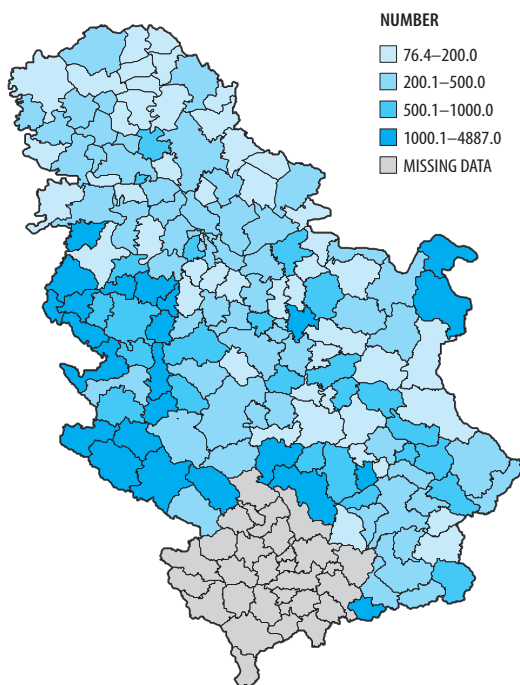


Source: MICS survey, 2005.

The disadvantages registered for preschool have influenced results in primary school and lead to striking disparities when it comes to enrolment in secondary education (MICS3). This is drastic for Roma children in Roma settlements, however it will also be difficult for many of the 20% poorest non Roma children to break out of a life in poverty.

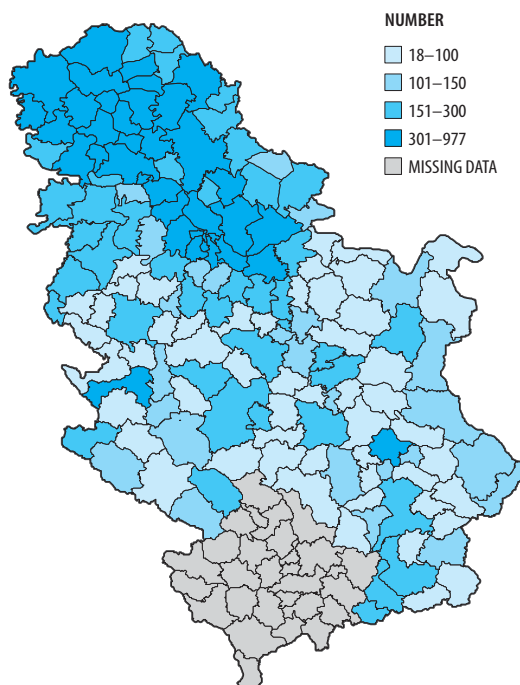
Distribution of educational institutions

Number of children age 3–7 per preschool institution



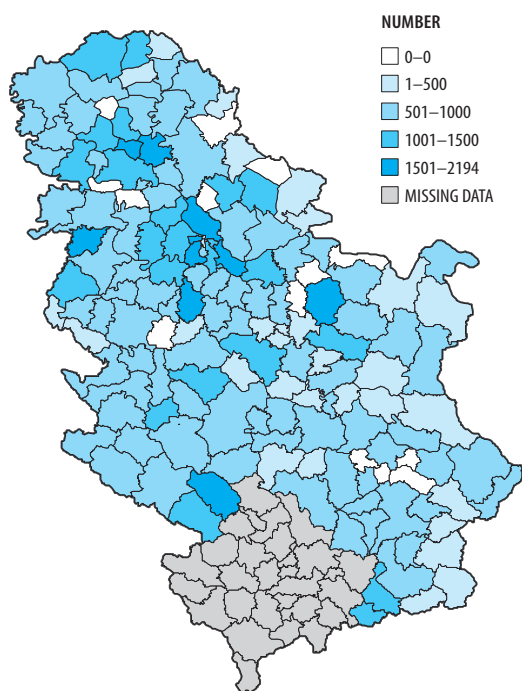
Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

Number of children age 7–14 per primary school institution



Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

Number of children age 15–18 per secondary school institution



Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

Public expenditure on education – In 2005, the share of education expenditure was 3.9 per cent of GDP. Since 2001 education expenditures have fluctuated between 3.5 and 4 per cent of GDP. This level of expenditures for education is similar to those in other transitional countries in the region (TransMonee).

The maps show the number of children at relevant age in preschools and schools in each municipality in Serbia. The first map shows the number of children aged 3 to 7 in preschools. There are small numbers of institutions in the regions of western, eastern and south-eastern Serbia. In some municipalities in these regions the number of children per institution exceeds 1 000.

Concerning primary schools, the picture is more favourable. However, in many municipalities in central, eastern and western Serbia the number of children of relevant age by institution is small. In some cases the number of pupils by elementary school is less than 100. If this number is divided by the eight grades of elementary school, the total number of pupils per class ranges between 10 and 15.

Secondary schools are concentrated in bigger towns, among which Belgrade and Novi Sad share first position. Also in bigger cities there is a larger number of children per secondary school institution. However, what is clear is that some municipalities do not have a single secondary school.

Table 2 Public expenditure on education as a percentage of GDP

	2001	2002	2003	2004	2005
Učešće rashoda za obrazovanje (% BDP)	3.8	4	3.5	3.7	3.9

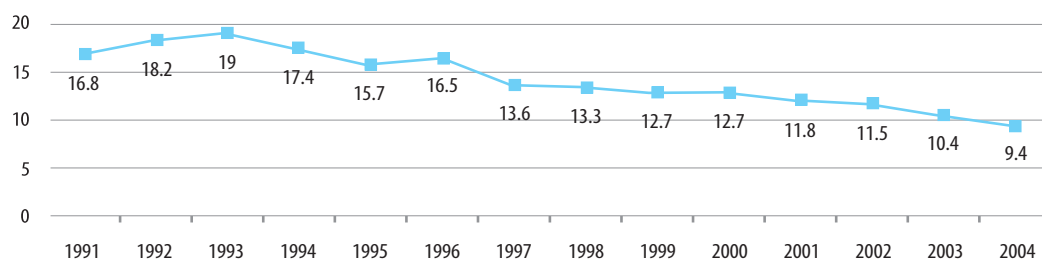
Source: Statistical Office of the Republic of Serbia – Statistics of education (DevInfo)

Health

The following graphs illustrate the indicators of health condition of the population. In 2004, the under-5 mortality rate was 9.4 per cent.⁶⁷

This indicator shows an improvement of the situation in 2004 relative to 1991. (In 1991 it was 16.8 per cent).

Graph 6 Under-5 mortality rate (%)



Source: Statistical Office of the Republic of Serbia - Vital statistics (DevInfo)

Comparing the under-5 mortality rate in 2003 in Serbia with other countries, Serbia occupies a position in the middle between developed and less developed countries in transition, while this indicator is higher than in industrially developed countries (TransMonee).

Table 3 Under-5 mortality rates for neighbouring countries

	Under-5 mortality rate			
	1990	1995	2000	2003
Albanija	45	34	25	21
Austria	10	6	6	6
Bosnia and Herzegovina	22	19	18	17
Bulgaria	16	18	16	15
Croatia	13	11	8	7
Czech Republic	11	8	5	4
Hungary	16	12	9	8
Italy	10	7	5	4
Poland	19	15	9	7
Romania	32	25	22	20
Slovakia	15	12	9	8
Slovenia	9	7	5	4
FRJ Macedonia	33	25	14	11
Serbia	18	16	13	10
CEE/CIS and Baltic countries	51	49	43	41
Industrialised countries	10	8	7	6
World	95	89	83	80

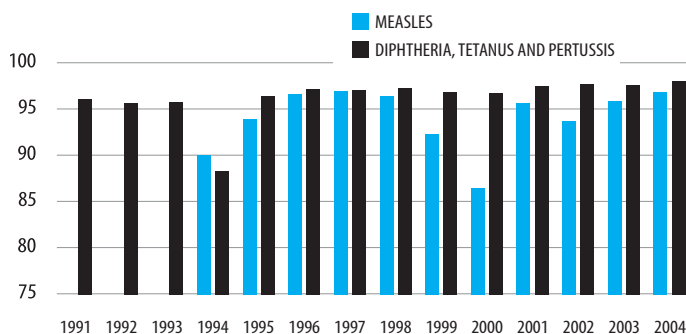
Source: *The State of the World's Children 2005*, UNICEF

⁶⁷ Number of deaths per 1 000 live births

Data about vaccination against various diseases (based on the Institute for Public Health data)

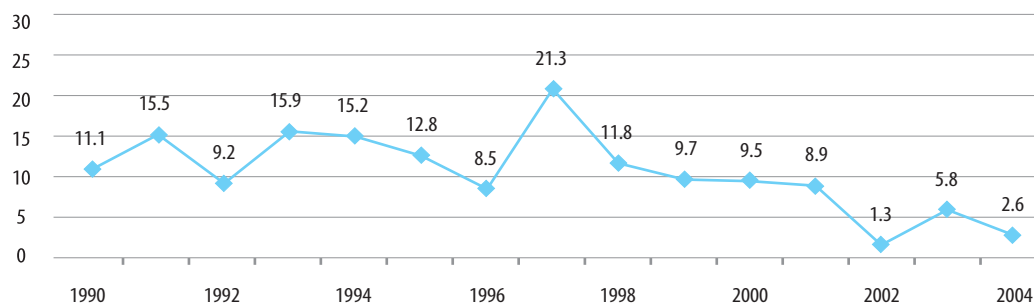
show the percentage of vaccinated children is constant at around 95 per cent.

Graph 7 Percentage of vaccinated children



Source: Institute for health protection – epidemiology (DevInfo)

Graph 8 Maternal mortality rate



Source: Statistical Office of the Republic of Serbia – Vital statistics (DevInfo)

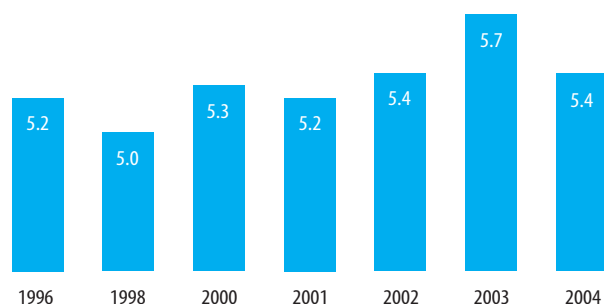
The maternal mortality rate shows a downward trend, although significant deviations due to the nature of the indicator itself have been recorded in some years.⁶⁸ The value of this indicator covers the range typical for countries in the region (TransMonee).

Another health indicator is the share of underweight newborns.⁶⁹ This indicator was 5 per cent in 2004, and has been constant since 2000. Like other health indicators, it shows a relative median position compared with other countries in transition in the region. For example Romania and Bulgaria have a slightly greater number of such cases, while Croatia and Macedonia show similar values (TransMonee).

⁶⁸ Number of deaths per 100 000 live births

⁶⁹ Number of newborns with less than 2 500 grams as percentage of all live births

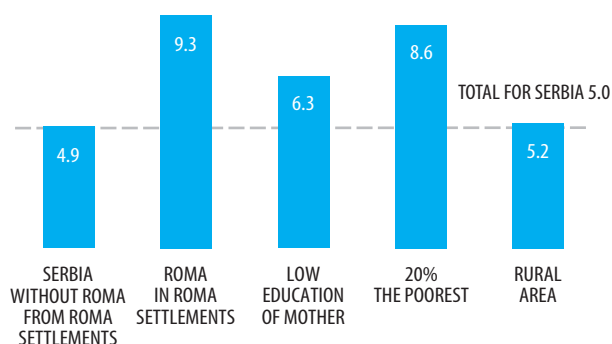
Graph 9 Share of underweight newborns (<2 500 g)



Source: Statistical Office of the Republic of Serbia - Vital statistics (DevInfo)

This indicator, however, also shows clear disparities – the values of this indicator are much higher among Roma people and among the poorest.

Graph 10 Share of underweight newborns (<2 500 g)



Source: MICS survey, 2005.

Public expenditure fore health – In 2005 the share of health expenditure was 6.5 per cent of GDP. From 2001 health expenditure as a percentage of GDP has fluctuated between 5.9 and 6.9 per cent.

Table 4 Public expenditure on health as a percentage of GDP

	2001	2002	2003	2004	2005
Public expenditure on health (% of GDP)	5.9	6.7	6.4	6.9	6.5

Source: Statistical Office of the Republic of Serbia – Vital statistics (DevInfo)

2

TABLES⁷⁰

Population

Table 1 Population, sex

TERITORIJA	POPULATION – census 2002			ESTIMATE – mid-year					
	Total	Male	Female	1994	2000	2001	2003	2004	2005
SERBIA	7 498 001	3 645 930	3 852 071	7 622 711	7 661 365	7 736 362	7 480 591	7 463 157	7 440 769
CENTRAL SERBIA	5 466 009	2 660 988	2 805 021	5 587 348	5 484 920	5 473 370	5 450 373	5 440 900	5 427 853
VOJVODINA	2 031 992	984 942	1 047 050	2 035 363	2 031 426	2 030 063	2 030 218	2 022 257	2 012 916

Table 2 Population by main age groups by census

	TOTAL	Preschool population under 7	Children from 7–14	Children under 18	Adults 18 and over	Female fertile population 15–49	Population from 15 to 64	Population 65 and over
		years	years	years	years	years	years	years
SERBIA	7 498 001	495 327	681 443	1 467 273	6 030 728	1 809 317	5 032 805	1 240 505
	100%	6.6%	9.1%	19.6%	80.4%	24.1%	67.1%	16.5%

⁷⁰ Excluding Kosovo (currently under United Nations administration)

CENTRAL SERBIA	5 466 009	360 727	493 829	1 064 187	4 401 822	1 312 721	3 646 774	925 320
	100%	6.6%	9.0%	19.5%	80.5%	24.0%	66.7%	16.9%
VOJVODINA	2 031 992	134 600	187 614	403 086	1 628 906	496 596	1 386 031	315 185
	100%	6.6%	9.2%	19.8%	80.2%	24.4%	68.2%	15.5%

Table 3 Population changes 1994–2005

	Mid-year population	Live births	Deaths		Natural increase	Live births	Deaths	Natural increase	Infant mortality per 1 000	Life expectancy	
			Total	Infant						Per 1 000 population	Children males
SERBIA – 1994	7 622 711	85 292	93 011	1311	–7 719	11.2	12.2	–1.0	15.4	69.5	74.2
C. SERBIA	5 587 348	63 697	65 493	1 000	–1 796	11.9	11.3	–0.3	15.7	70.1	74.8
VOJVODINA	2 035 363	21 595	27 518	311	–5 923	10.8	13.8	–2.9	14.4	68.3	73.6
2000	7 661 365	73 764	104 042	785	–30 278	9.6	13.6	–4.0	10.6	69.6	74.8
2004	7 463 157	78 186	104 320	633	–26 134	10.5	14	–3.5	8.1	69.9	75.4
SERBIA – 2005	7 440 769	72 180	106 771	579	–34 591	9.7	14.3	–4.6	8.0	–	–
C. SERBIA	5 427 853	53 122	76 647	446	–23 525	9.8	14.1	–4.3	8.4	–	–
VOJVODINA	2 012 916	19 058	30 124	133	–11 066	9.5	15	–5.5	7.0	–	–

Table 4 Infant and child mortality 1994–2004

	1994	1996	1998	2000	2001	2002	2003	2004
S E R B I A								
INFANT MORTALITY PER 1 000 LIVE BIRTHS – Total	15.4	14.6	11.6	10.6	10.2	10.1	9.1	8.1
Male	17.2	16.4	12.7	12.4	12	11.7	9.7	9.2
Female	13.4	12.8	10.3	8.8	8.3	8.5	8.4	6.9
UNDER 5 MORTALITY RATE – Total	17.4	16.5	13.3	12.7	11.8	11.5	10.4	9.4
Male	19.4	18.3	14.5	14.4	13.7	13.2	11.2	10.8
Female	15.4	14.5	12.2	11	9.7	9.8	9.6	7.9
PERINATAL INFANT MORTALITY RATE (Infant mortality from 0 to 6 days per 1 000 live births)	14.7	13.9	12.4	11.2	11	11.2	10.3	9.9
% OF UNDERWEIGHT LIVE BIRTHS (under 2 500 g)	–	5.2	5	5.3	5.2	5.4	5.7	5.4
MATERNAL MORTALITY RATE (per 100 000 live births)	15.2	8.5	11.8	9.5	8.9	1.3	5.8	2.6

CENTRAL SERBIA								
INFANT MORTALITY PER 1 000 LIVE BIRTHS – Total	15.7	15.3	12.2	10.7	10.4	10.4	9.6	8.5
Male	17.1	17.1	13.4	12.6	12.6	12	10.2	9.5
Female	14.2	13.4	10.9	8.6	8.1	8.6	9.1	7.3
UNDER 5 MORTALITY RATE – Total	17.7	16.8	14.1	12.5	11.9	11.8	11	9.7
Male	19.3	18.6	15.3	14.1	14.2	13.4	11.7	11
Female	16	15	12.7	10.8	9.4	10	10.2	8.2
PERINATAL INFANT MORTALITY RATE (Infant mortality from 0 to 6 days per 1 000 live births)	14.5	14.5	12.7	11.5	11.4	11.2	10.5	10.1
% OF UNDERWEIGHT LIVE BIRTHS (under 2 500 g)	–	5.7	5	5.4	5.3	5.5	5.9	5.4
MATERNAL MORTALITY RATE (per 100 000 live births)	12.6	8.2	10.6	10.9	5.2	1.7	4.0	1.7
VOJVODINA								
INFANT MORTALITY PER 1 000 LIVE BIRTHS – Total	14.4	12.8	9.7	10.5	9.5	9.4	7.5	7.1
Male	17.4	14.4	10.8	11.9	10.2	10.7	8.4	8.2
Female	11.3	11.1	8.6	9.1	8.8	8	6.5	5.9
UNDER 5 MORTALITY RATE – Total	16.7	15.5	11.3	13.4	11.4	10.9	8.9	8.6
Male	19.7	17.5	11.9	15.2	12.3	12.6	9.9	10.1
Female	13.6	13.3	10.6	11.4	10.5	9.2	7.8	6.9
PERINATAL INFANT MORTALITY RATE (Infant mortality from 0 to 6 days per 1 000 live births)	15.3	12.1	11.8	10.4	9.9	11.2	9.8	9.3
% OF UNDERWEIGHT LIVE BIRTHS (under 2 500 g)	–	5.3	5.1	5.1	5.2	5.4	5.2	5.3
MATERNAL MORTALITY RATE (per 100 000 live births)	23.2	9.3	15.1	5.3	19.8	0	10.1	4.9

Health

Table 5 Health care children and youth 1994–2004

	Immunised against DTP3 (children under 1 year) %	Immunised against measles (children under 1 year) %	Primary health protection of children	Youth pregnancies (aged 15–19) Rate		Sexually transmitted diseases adolescents (15–19) Rate	HIV / AIDS		Prevalence of tuberculosis per 100 000 population
				Pregnancies	Termination		Death	Infected	
SERBIA									
1994	88.2	90.1	–	–	–	–	62	89	–
2000	96.9	86.6	7.1	17.5	4.8	25	50	80	57.5
2001	97.8	95.7	7.3	18.4	4.3	26	61	80	58.2
2002	97.9	93.8	8.5	18.3	4.7	78	25	79	59.4
2003	97.8	96	8.3	18.2	4.4	67	26	60	55.6
2004	98.1	97	8.2	17.4	4.3	59	27	57	31.2
CENTRAL SERBIA									
1994	96.8	89.2	–	–	–	–	56	84	–
2000	96.6	88.3	7.2	16.7	4.5	18	43	74	51.9
2001	97.9	95.1	7.3	18.2	3.9	–	56	71	51.2
2002	98	93.7	8.8	18.9	4.2	19	22	70	53.0
2003	97.6	95.6	8.5	18.5	4.0	11	25	53	49.9
2004	98.2	96.7	8.5	17.6	3.8	10	22	49	42.8
VOJVODINA									
1994	94.3	92.6	–	–	–	–	6	5	–
2000	97.5	82.1	6.7	18.6	5.6	7	7	6	70.6
2001	97.5	97	7.2	18.9	5.2	–	5	9	75.1
2002	97.8	93.4	7.6	16.7	6.1	59	3	9	73.1
2003	98.1	96.7	7.7	17.4	5.3	56	1	7	71.1
2004	97.9	97.8	7.5	16.8	5.7	49	5	8	–

Education

Table 6 Education coverage preschool, primary school, secondary school and schooling continuation 1995–2005

	1995	2000	2001	2002	2003	2004	2005
S E R B I A							
PRESCHOOL EDUCATION (3 to 7 years)							
Coverage %	31.4	35.6	36.4	38.1	37.3	37.3	39.2
PRIMARY EDUCATION							
Pupils	780 876	726 578	706 872	691 334	677 767	644 577	656 103
Net enrolment ratio in primary education	–	98.5	94.7	96.1	94.3	94.5	95.6
Prop. of pupils starting grade 1 who reach grade 5	–	92.7	96.9	97.5	93.9	98.3	97.8
Primary completion rate	90.9	92.1	91.8	94.5	94.7	92.2	92.4
Pupils per teacher	17.8	16.5	16.2	15.8	15.3	14.7	14.4
SECONDARY EDUCATION							
Pupils	318 809	330 947	323 318	306 411	305 204	295 799	291 477
Net enrolment ratio in secondary education	72.9	78.8	75.7	77.5	76.1	74.9	76.4
Secondary completion rate	77.3	83.4	82.4	77.5	86.9	84.4	85.7
Pupils per teacher	12.6	13.6	13.1	12.2	11.8	11.3	10.9
C E N T R A L S E R B I A							
PRESCHOOL EDUCATION (3 to 7 years)							
Coverage %	29.9	33.8	34.5	36.6	36.2	35.9	37.8
PRIMARY EDUCATION							
Pupils	570 733	529 847	516 024	505 222	495 396	485 672	479 749
Net enrolment ratio in primary education	–	95.9	94.5	96.7	94.6	97.2	96.9
Prop. of pupils starting grade 1 who reach grade 5	–	93.7	97.1	98.8	94.6	98.3	98.3
Primary completion rate	90.8	91.4	91.7	94.2	95.1	93.1	93.4
Pupils per teacher	18.9	16.6	16.2	16.0	15.5	14.9	14.6
SECONDARY EDUCATION							
Pupils	235 554	246 672	240 820	226 454	225 348	218 600	215 509
Net enrolment ratio in secondary education	72.7	80.4	76.4	79.3	78.7	77.5	78.8
Secondary completion rate	77.6	84.2	82.6	78.3	86.6	85.8	87.5
Pupils per teacher	12.4	13.6	13.2	12.2	11.8	11.3	10.9

VOJVODINA
PRE-SCHOOL EDUCATION (3 to 7 years)

Coverage %	37.9	40.6	41.5	42	40.8	43.5	43
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PRIMARY EDUCATION

Pupils	210 143	196 731	190 848	186 112	182 371	178 905	176 354
Net enrolment ratio in primary education	–	96.7	95.4	94.6	93.4	92.1	92.3
Prop. of pupils starting grade 1 who reach grade 5	–	90.2	96.1	94.2	91.9	98.6	97.3
Primary completion rate	91.4	93.6	92.0	95.3	93.5	90.1	89.5
Pupils per teacher	17.7	16,3	15.9	15.3	14.7	14.2	13.8

SECONDARY EDUCATION

Pupils	83 255	84 275	82 948	79 957	79 856	77 199	75 968
Net enrolment ratio in secondary education	72.9	74.6	73.9	72.9	69.7	68.3	70.4
Secondary completion rate	76.1	81.0	81.9	73.5	87.7	82.1	80.6
Pupils per teacher	13.3	13.3	12.8	12.3	11.9	11.4	10.9

Economy

Table 7 Gross Domestic Product GDP 1999–2005

SERBIA	1999	2000	2001	2002	2003	2004	2005 *
GDP – Total mill. din.	210 232.3	397 655.6	783 896.7	1 020 116.5	1 171 563.8	1 431 313.1	1 750 000.0
GDP – Total mill. USD	11 450.6	9 013.0	10 431.1	12 171.8	16 123.9	20 965.5	–
GDP – Total mill. EUR	17 915.0	26 431.3	13 186.2	16 811.8	18 008.7	19 723.5	21 107.9
GDP per capita din.	27 881	52 905	104 472	136 015	156 614	191 784	–
GDP per capita USD	1 518.6	1 199.1	1 390.2	1 622.9	2 155.4	2 809.2	–
GDP per capita EUR	2 375.9	3 516.5	1 757.4	2 241.6	2 407.4	2 642.8	–
INDEX (previous year = 100)	101.0	105.2	105.1	104.5	102.4	109.3	106.5

* Estimate

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