

**UNITED NATIONS
DEVELOPMENT ASSISTANCE FRAMEWORK
(U N D A F)**

***Serbia and Montenegro
2005 - 2009***

Belgrade, March 2004

CONTENTS

	Page
1. Introduction	3
2. Signature Page	5
3. Millennium Development Goals and Country Programme Outcomes.....	6
4. Results Section	7
A Institutional Reform and Public Administration Reform	7
B Judicial Reform & the Rule of Law	12
C Sustainable Development	15
5. Estimated Resource Requirements	18
6. Monitoring and Evaluation.....	19
M&E Framework	19
A Institutional Reform and Public Administration Reform	19
B Judicial Reform & the Rule of Law	28
C Sustainable development	32
7. Acronyms and Abbreviations.....	38

1. Introduction

What role should the United Nations (UN) system and its agencies, funds and programmes play in helping shape the future of Serbia & Montenegro (SCG)¹? How can UN system development cooperation have greater long-term impact? The United Nations Development Assistance Framework (UNDAF) below, the first for Serbia & Montenegro, seeks to answer these questions, based on the findings of the Common Country Assessment (CCA) undertaken by the UN in 2003. Due to the special circumstances of Kosovo, no formal UNDAF was prepared separately for the programme cycle.

The CCA found that Serbia & Montenegro (SCG) faced several challenges in its advancement of human development. The conditions in the then Federal Republic of Yugoslavia (FRY) in the 1990s led to a sharp decline in the human development indicators. Shortfalls and gaps in the realisation of economic and social rights – to education, to adequate food, to health, to decent work, to adequate housing – have made citizens increasingly vulnerable to poverty in the past decade. Abuse of political rights led to the institutions being seriously depleted of resources, both human and financial. Cultural rights were not respected as previously decentralised power returned to the central authorities in some parts of the then FRY, often at the expense of the minorities.

To support the efforts in becoming a modern, democratic and European state, which plays a pivotal role in regional stability, the United Nations Country Team (UNCT)² in close consultation with the SCG member states, civil society stakeholders, the private sector and the international community, has prepared a United Nations Development Assistance Framework.

Preparation Process

The United Nations Country Team (UNCT), SCG member states and civil society organisations prepared for the UNDAF by jointly undertaking a 3-day training exercise in September 2003. The UNCT subsequently convened three working groups, one per each outcome area as identified in the CCA, to draft the results matrix. The Office of the Resident Coordinator (ORC) managed the process. A consultative stakeholders' workshop was held in October 2003 to ensure the UNDAF had broad-based ownership and non-resident UN agencies as well as the UN Secretariat were invited to comment. Stakeholders were drawn from the SCG member states, the private sector, development partners, civil society and young people. Guided by the SCG member states' priorities as outlined by the PRSPs of the republics of Montenegro and Serbia, SCG member states' reform strategies, the MDGs and areas of possible future UN cooperation identified by the CCA, stakeholders warmly endorsed these proposals. Final stakeholders' consultations were held in December in Podgorica and Belgrade respectively to comment on the near-final draft. In March 2004 the UNCT held a joint strategy meeting with SCG member states' after which they co-signed the UNDAF with the UNCT. Through this UNDAF process the UNCT hopes it has made a modest contribution to the simplification and harmonisation process on aid delivery underway both internationally and in Serbia & Montenegro.

The UNDAF is grounded in a human rights based approach to developmental issues and strives to bring greater coherence of programmes and increased opportunity for joint initiatives that utilises the UN's comparative advantages. The UN Country Team believes through this strategic approach and results driven support to the national efforts to achieve Serbia and Montenegro's own priorities and needs, as outlined in the Poverty Reduction Strategy Papers (PRSPs), the Economic Reform Agenda for Montenegro, Serbia on the Move, Plans of action for Children in Serbia and in Montenegro, other reform documents of the SCG member states, the Millennium Development Goals (MDGs) and the Millennium Declaration, there will be a greater long-term coherence of UN assistance.

Today Serbia & Montenegro is much different from the one inherited by the victorious democratic forces in October 2000. Constitutional changes have witnessed the FRY replaced by a looser

union of two member states with five competencies remaining at state level: Defence, Foreign Affairs, International Economic Relations, Human and Minority Rights and Internal Economic Relations; the remainder are the prerogative of the two SCG member states: the Republic of Serbia and the Republic of Montenegro. Since

¹ The Constitutional Charter of the state union of Serbia & Montenegro (SCG) states that SCG is comprised of two member states: Serbia *and* Montenegro. This document therefore uses the term SCG member states. In accordance with UN Security Council Resolution 1244 Kosovo is under international administration.

² The UNCT comprises the 11 UN agencies resident in Serbia & Montenegro -- FAO, ICTY, OHCHR, UNDP, UNEP, UN-Habitat, UNHCR, UNICEF, UN Office/Belgrade, WFP, WHO as well as the IOM which collectively interact closely with the resident International Financial Institutions, the IFC, IMF and World Bank.

February 2003 FRY has become known as Serbia & Montenegro. Reforms in Serbia have been underway for three years and for six in Montenegro, which distanced itself from Federal Yugoslav authorities in 1997. Democracy is continually being consolidated in both SCG member states though the fragility of these gains was demonstrated in March 2003 when the Prime Minister of Serbia was assassinated. Nevertheless the signs are encouraging. Refugees are slowly returning to neighbouring countries as relations warm and the highest political authorities renew trust. Successes have also been witnessed through economic reform, economic growth and stability, regional stability, coherent policy evolution, reform of the legislative framework and social reforms. Challenges however remain in key areas: the fight against poverty, the constitution of a modern state based on the rule of law and democratisation, and revitalisation of the economy. To achieve this Serbia and Montenegro are addressing the root causes by focusing on European integration, harmonisation of the constitutions in line with modern states, poverty reduction, social inclusion and accelerated growth, strengthened democratic processes, the fight against organised crime, implementation and institutionalisation of reform, public investments, refugee returns, regional cooperation and combating the proliferation of small arms and light weapons.

The UNDAF translates the key dimensions of the CCA into a common operational framework for development activities upon which individual UN agencies, funds and programmes will formulate their assistance for the five-year period 2005-2009. The UNDAF will guide the UN system's efforts to assist the people of Serbia & Montenegro and the SCG member states as they continue down the reform path towards the Euro-Atlantic mainstream and to achieving international standards. The UNDAF therefore focuses on three areas of cooperation where the UN system best utilises its financial resources, technical expertise and accumulated experience:

- 1. Institutional Reform and Public Administration Reform**
- 2. Judicial Reform and the Rule of Law**
- 3. Sustainable Development**

UN system activities in 2002 accounted for over US\$100 million, which has delivered tangible results appreciated by the then FRY authorities. This figure is predicted to be in the region of US\$300 million for the UNDAF period of 2005-2009. Whilst donor support to the Western Balkans is dwindling and funding shifts from humanitarian to development assistance and from grants to loans, recent events have served as a wake-up call about the fragility of transition and risk of premature donor disengagement.

The UNCT through this UNDAF charts the main areas where the combined strength of the UN system can best be brought to bear in facilitating and supporting sustainable human development change in the country in the years to come, complementary to the efforts of other actors and in full partnership with government at all levels, including with civil society. The UNCT earnestly hopes that this will enable and promote the achievement of the global Millennium Development Goals and other targets subscribed to by Serbia & Montenegro.

2. Signature Page

The United Nations Country Team in Serbia and Montenegro supports the strategic objectives and development plans of the SCG member states to ensure human rights for all and to improve the lives of all citizens, especially those of the most excluded and vulnerable.

We shall work closely with the SCG member states and stakeholders at all levels including development partners, civil society, the private sector and people to support the reform process, the achievement of international standards, European integration, consolidation of peace and democracy and sustainable development.

In pursuing these goals, we will ensure the transparent and accountable use of the resources made available to us for this purpose.

Our collective aspiration is to assist all the peoples of Serbia & Montenegro on their path to their European destiny which provides a better and brighter future for all.

Done in Belgrade on this **31st day of March 2004** in two original copies in English.

H.E. Mr Goran Svilanović
Minister of Foreign Affairs
of Serbia & Montenegro

Mr Francis M. O'Donnell
UN Resident Coordinator for Serbia and Montenegro
& UNDP Resident Representative³

Ms Ann-Lis Svensson, UNICEF Area Representative

Mr Dario Carminati, UNHCR Representative

Dr Luigi Migliorini, WHO Head of Office

Mr Roeland Kortas, UNEP/UNOPS Programme Manager

Ms Laurie Wiseberg, OHCHR Chief of Mission a.i.

Ms Ligia Ramirez, UN Habitat, Head of Office

Mr Deyan Mihov, UN ICTY Head of Belgrade Office

Mr Christopher Gascon, IOM Chief of Mission

Ms Carolyn Jungr, World Bank Resident Representative

³ Signing also on behalf of the FAO

3. Millennium Development Goals and Country Programme Outcomes*

1. Eradicate extreme poverty and Hunger	<p>Extreme poverty is specifically targeted through activities aimed at:</p> <ul style="list-style-type: none"> • Better social welfare services (1.7.) • Enabling vulnerable groups to access adequate shelter (1.9) • Special budget for children to improve social services for children from poor families (1.10) • Strengthened employment policies (3.7) • Support to achieving efficient people-centred public sector aimed at poverty alleviation (1.1)
2. Achieve universal primary education	<p>Considering the relatively high enrolment rates in SCG, efforts are focused on:</p> <ul style="list-style-type: none"> • Education quality (1.2 and 1.10) • Improved access to education for the most disadvantaged and vulnerable children (1.3) and for children in undeveloped areas (3.6)
3. Promote gender equality and empower women	<p>Achievement of the following outcomes directly promotes gender equality and the empowerment of women:</p> <ul style="list-style-type: none"> • Enabling access to education for girls from disadvantaged groups (1.3) • Prevention and response structures developed to address violence, abuse, neglect and exploitation (2.5) • Promotion of women's rights (2.6) • Support to achieving efficient people-centred public sector aims at a higher representation of women in government and other public institutions in accordance with international standards (1.1)
4. Reduce child mortality	<p>Reduction of child mortality rates are to be achieved by:</p> <ul style="list-style-type: none"> • Ensured access to quality primary health care (1.4) • Proper vaccination (1.5) • Specific budget allocation for children (1.10) • Proper care for children provided by primary caregivers at the local level (3.6)
5. Improve maternal health	<p>Improved maternal care is seen to be achieved by:</p> <ul style="list-style-type: none"> • Access to quality primary health care and development of protocols for integrated maternal health and safe motherhood (1.4.) • Effective human rights institutions (2.1 and 2.2) • Prevention of neglect (2.5) and raising awareness on women's rights (2.6)
6. Combat HIV/AIDS, malaria and other diseases	<p>Specific outputs (1.8) are designed to combat HIV/AIDS. Results are also expected from the interventions in the health care system infrastructure, human resources strengthening and drug availability to combat HIV/AIDS and other diseases, like TB (1.4)</p>
7. Ensure environmental sustainability	<p>Development of environmental protection policies (1.6), access to adequate housing for the vulnerable (1.9), access to safe drinking water (3.1) and raising awareness about protection of environmental resources and preparedness for natural and man made disasters (3.3), all contribute to environmental sustainability.</p>
8. Develop a global partnership for development	<p>Improved public administration and strengthened capacity to comply with international standards (1.1) and strengthened rule of law (2.1), should provide the basis for a global partnership for development through free trade and financial system that is rule based and non-discriminatory.</p>

* Some Country Programme Outcomes contribute directly or indirectly to the achievement of all 8 MDGs. 1.1 supports the national commitment to good governance and development with the goal of achieving an efficient, accountable and people-centred public sector. 2.1 and 2.2 promote human rights through a strengthened rule of law and enhance equal access to justice. 3.1 supports sustainable development, 3.2 raises people's awareness of their rights.

4. Results Section

A Institutional Reform and Public Administration Reform

SCG Priority: Improved quality of, and equitable access to, public services.	
UNDAF Outcome: Efficient, accountable and people-centred public sector	
Country Programme Outcomes	Country Programme Outputs
1.1. Improved efficiency, accountability and transparency in public administration (UNDP, WHO)	1.1.1. Self-assessment of capacity, using tools such as functional review and Common Assessment Framework, practiced and integrated into decision-making processes (UNDP) 1.1.2. CSOs involved in monitoring the work of civil service (UNDP) 1.1.3. Competency of civil servants to participate in the policy making, implementation and evaluation process increased (UNDP, WHO) 1.1.4. Capacity of the Council of Ministers of SCG & SCG Member States' government institutions to manage human resources strengthened (UNDP, WHO) 1.1.5. Structures and processes for strategic public management in the Council of Ministers of SCG & SCG Member States' introduced (UNDP) 1.1.6. Administrative processes and access to information relevant to the public interest improved via ICT (UNDP) 1.1.7. Managerial capacity of provincial administration of Vojvodina strengthened (UNDP) 1.1.8. Capacity of local governments to participate in Council of Ministers of SCG & SCG Member States' policymaking and policy implementation strengthened (UNDP) 1.1.9. The Assembly of SCG & SCG Member States' Assemblies' role in providing oversight of public spending strengthened (UNDP)
MDGs: 1-8	1.1.10. Information systems for data monitoring improved (UNDP, UNCT) 1.1.11. SCG member states' health indicator data-base to support evidence based decision making and monitoring of progress towards MDGs developed (WHO) 1.1.12. Stewardship function of the MoHs strengthened (WHO)
Role of Partners: Leading SCG & SCG member states' ministries to provide commitment and guidance in identifying capacity needs, and to ensure budgeting incremental government cost sharing over time, Serbian Ministry of Labour, Employment and Social Affairs will continue to manage the Social Innovation Fund. SCG & SCG member states' statistical offices. International partners: EAR, WB, OSCE, SIDA, DFID, Netherlands, Germany, Italy, Austria, Switzerland, OSI, RBF. WB Country Assistance Strategy (CAS) for SCG will be defined in late 2004, but for the planning purposes a number of projects have been identified preliminary that lead to Restoring macro-economic stability and external balance, and Improving governance and building effective institutions through Public Administration Reform (PAR) at Serbian, Montenegrin and State Union level. Specific outputs: review and chart of the pay system in the central administration, establish government Council for PAR to mobilize political support and ensure operational dimension, formulate strategy and detailed action plan for PAR, strengthen government Secretariat to ensure adequate decision making capacities.	

* Role of Partners Note: Inputs in this column are based on available data and will be updated as donor plans are finalized

1.2. Preconditions for optimal development for young children ensured (UNICEF)	1.2.1. Development of integrated SCG member states' IECD policies supported (UNICEF) 1.2.2. Needs for alternative models of education and care of preschool children assessed (UNICEF) 1.2.3. Community and parents aware of needs for preschool education (UNICEF) 1.2.4. Professional management training models for IECD provided in targeted municipalities (UNICEF)
MDG: 2	1.2.5. Models of diversified pre-school service established (UNICEF) 1.2.6. Professional staff apply new methods of pre-school education (UNICEF)
Role of Partners SCG Member states' ministries in charge of education, in (MoE), health (MoH), and of social welfare/affairs will coordinate and lead the process of development of Integrated Early Childhood Development (IECD) Policies and their implementation and monitoring; Professional staff, parents and local civil society organizations will be the key players in ion in raising awareness by community and parents of the need for pre-school education and on the implementation of the new IECD initiatives.	
1.3. All children, especially the most disadvantaged and vulnerable ones, have access to and complete primary education of good quality (UNHCR, UNICEF)	1.3.1. System in place to regularly monitor access to school and school practices of inclusion (UNICEF) 1.3.2. Protocols, guidelines and models in place for inclusive education policies and practices (UNICEF) 1.3.3. Education programmes in schools and local communities for improving access and retention rates of Roma and IDPs in primary education in place (UNHCR, UNICEF) 1.3.4. Children acquire essential life skills in school (UNICEF) 1.3.5. Gender equality in primary education assessed (UNICEF) 1.3.6. Education authorities, teachers, parents and students develop and apply approaches to gender sensitivity, non-discrimination, ethnic diversities and equality (UNICEF) 1.3.7. Teachers possess skills and knowledge to apply child centred practices in schools (UNICEF)
MDGs: 2 and 3	1.3.8. Community, parents and students are involved in education monitoring, planning and management (UNICEF) 1.3.9. Strong local and SCG member states' commitment for Education for all mobilised and action plans for enhancement investment in education developed (UNICEF)
Role of Partners: SCG Member States' ministries in charge of education, with the participation of civil society and international organisations, will lead in education including for budgetary allocation and mechanisms for cost sharing between central and local level. Council for Child Rights in Serbia and Committee for Children's Rights in Montenegro will ensure prioritisation of children in line with Plans of Action for Children and PRSP. CoE, Stability Pact, EAR, WB, OSCE to complement with their programmes and participate in developing strategies. Potential bilateral donors: CIDA, SIDA, Finland, Norway, Greece, Japan, Italy, Luxemburg, SDC, Germany, Austria – to complement with the programmes and to contribute funds for the most disadvantaged children. WB is preliminary planning to invest in education system at all levels and focusing on qualitative and relevant secondary and higher education, as well as vocational and occupational training.	
1.4. Universal access to quality primary health care ensured. (UNICEF, WHO)	1.4.1. Civil society participation in policy and services design and delivery enhanced (UNICEF, WHO) 1.4.2. Children, adolescents, women and families possess skills and knowledge to practice healthy lifestyles (UNICEF, WHO) 1.4.3. Protocols and guidelines for integrated maternal and child health, newborn care, adolescent health, safe motherhood developed (UNICEF, WHO) 1.4.4. Improved SCG member states' policy environment for better health (WHO, UNICEF)

MDGs; 4,5 and 6	1.4.5. TB burden in the country reduced and appearance of multi-drug resistant TB prevented (WHO) 1.4.6. Infrastructure and human resources of the health system strengthened (WHO)
<p>Role of Partners: Ministries of Health with the participation of Civil Society and international organisations leads on new healthcare legislation in line with international conventions and treaties, with special emphasis on service quality, participation and inclusion of marginalised; International partners (WB, EU, EAR, USAID and INGOs) to provide technical and financial support for policy implementation and monitoring together with Experts' Associations and CSOs. SCG member states' partners are expected to identify and mobilize additional national sources in order to further the development of activities that will supplement the agreed priorities related to health and jointly with the UN and other partners monitor their implementation, and amend work-plans based on changing needs. WB is preliminary planning to be engaged in supporting good governance in the health sector, financially sustainable health financing system, also efficient in delivery and access, pharmaceutical policy that ensures safety and quality, transparent supply and access to essential drugs.</p>	
1.5. 90 percent of children in every district of the country fully protected from vaccine preventable diseases in a sustainable way (UNICEF, WHO)	1.5.1. Sustained elimination of polio is sustained (UNICEF, WHO) 1.5.2. Elimination of measles and neonatal tetanus (UNICEF, WHO) 1.5.3. Immunization monitoring and communicable diseases' surveillance system improved (UNICEF, WHO,) 1.5.4. Special budget allocation for sustainable vaccine supply for all antigens included in the SCG member states' Calendar ensured for the next 5 years (UNICEF, WHO) 1.5.5. New and under used vaccines introduced into immunization calendar (UNICEF) 1.5.6. Local community teams established for identification of non-vaccinated children (UNICEF, WHO)
MDG: 4	1.5.7. Non-vaccinated children identified, vaccinated and included into social systems (UNICEF)
<p>Role of Partners: Ministries of Health, Institutes of Public Health work via established Inter-sectoral Immunization Committees which coordinate all activities related to immunization. Health Insurance Fund to ensure that all vaccines are available to all children free of charge; CSOs to assist in identifying non-vaccinated children and to raise awareness. Demand for immunisation created jointly by media, CSOs and professionals working in the area.</p>	
1.6. Environmental health and environmental protection policies developed and management systems in place at all levels (FAO, UNDP, UNEP, UNICEF, WHO)	1.6.1. SCG member states' Food and Nutrition Action Plans in place, with special emphasis on Food Safety (FAO, UNICEF, WHO) 1.6.2. Protocols and guidelines for proper child nutrition practice developed (UNICEF, WHO) 1.6.3. Legislation on Iodine deficiency disorders enhanced (UNICEF, WHO) 1.6.4. Established monitoring system for Universal Salt Iodization (UNICEF) 1.6.5. International Code for Breast milk Substitutes adopted (UNICEF, WHO) 1.6.6. Inter-sectoral bodies for tobacco-control fully functional, implementing the SCG member states' Tobacco Control Policy (WHO) 1.6.7. National Environmental Health Action Plan developed, implemented and monitored (UNDP, UNEP, WHO)

MDGs: 4 and 7	<p>1.6.8. SCG member states' plans of action for Children Environmental Health developed, implemented and monitored (UNICEF, WHO)</p> <p>1.6.9. Strengthened SCG member states' capacities for sustainable consumption and clear production (UNEP)</p> <p>1.6.10. SCG member states' policies and strategies for environmental protection aligned with international agreements and country implementation plans developed (UNDP, UNEP, WHO)</p>
<p>Role of Partners: Existing SCG member states' Commissions for IDD and Breastfeeding will coordinate implementation of IDD and Breastfeeding promotion in the country, health staff (from Institutes of Public Health and health centres), consumers' associations and CSOs participate including in the monitoring of universal salt iodisation and implementation of International Code for Breastmilk Substitutes. SCG Member States' ministries in charge of environment, health, agriculture, trade, SCG member states' Commissions for Nutrition, IDD & Breastfeeding, Consumers' Associations, CBOs. Potential partners: Stability Pact, EAR, USAID.</p>	
<p>1.7. Improved access to high-quality social welfare systems with focus on excluded people (UNDP, UNHCR, UNICEF)</p>	<p>1.7.1. Standards of care, protection and service delivery are upgraded, officially endorsed and applied in practice (UNICEF)</p> <p>1.7.2. Outreach capacity of social services is increased in poor municipalities (UNHCR, UNICEF)</p> <p>1.7.3. Protocols of cooperation between both member states' social services and NGOs in social protection are developed and implemented (UNDP, UNICEF)</p> <p>1.7.4. Models of multidisciplinary work are developed and implemented, and become integral part of social protection working standards and practice (UNICEF)</p>
MDG: 1	<p>1.7.5. Provision of improved and innovative social services through Social Innovation Fund also aiming at fostering public-NGO partnership (UNDP)</p>
<p>Role of Partners: Member States' respective ministries in charge of social affairs, health, education and justice and SCG member states' institutions will review and develop standards and corresponding training packages and means to monitor their adequate implantation. Local NGOs in partnership with governmental authorities will consolidate their roles and contribute to development of the new social protection system. Council for Child Rights (Serbia) and Committee for Children's Rights (Montenegro) will monitor and advise.</p>	
<p>1.8. Effective SCG member states' systems to prevent and respond to HIV/AIDS are in place (UNAIDS TG, UNICEF)</p>	<p>1.8.1. Support state members' to create HIV/AIDS strategies (UNAIDS TG)</p> <p>1.8.2. HIV/AIDS surveillance system in line with international standards set up (UNAIDS TG)</p> <p>1.8.3. Protocols, guidelines and services in place for HIV/AIDS prevention, voluntary confidential counselling and testing (VCCT), prevention of mother-to-child transmission (PMTCT), treatment of people living with HIV/AIDS (PLWHA), including outreach services for especially vulnerable people (UNAIDS TG)</p> <p>1.8.4. Education professionals possess knowledge and skills to teach HIV/AIDS through life-skills based health education within the formal education system (UNICEF)</p> <p>1.8.5. System for reporting and acting upon violation of rights for PLWHA is in place (UNAIDS TG)</p>

MDG: 6	<p>1.8.6. Community, particularly children, young people and vulnerable groups have increased risk awareness of HIV and benefit from harm reduction and protective services (UNAIDS TG)</p> <p>1.8.7. SCG member states' capacity to negotiate for and procure affordable drugs for HIV/AIDS patients strengthened (UNAIDS TG)</p>
<p>Role of Partners: Republican AIDS and Tuberculosis Commission of Serbia; Republican Commission on AIDS of Montenegro; Member States' respective ministries in charge of health and education; SCG Member States' Health Insurance Funds. International partners: Global Fund on Aids, TB & Malaria, CIDA, DFID, Imperial College - London, Open Society Institute, USA, UNAIDS Geneva, CPHA. Possibly: EU and other bilateral donors.</p>	
<p>1.9. A comprehensive social housing financing and implementing mechanism is established in Serbia to enable refugees and other vulnerable groups to access adequate shelter (UN-Habitat, UNHCR)</p>	<p>1.9.1. Housing department established in the Government of Serbia (UN-Habitat)</p> <p>1.9.2. SCG member states' housing policy drafted and adopted (UN-Habitat, UNHCR)</p> <p>1.9.3. Guidelines, norms and methodologies for local housing policies, planning and design of social housing complexes and respective legal framework in place (UN-Habitat)</p> <p>1.9.4. Serbian social housing fund established (UN-Habitat)</p> <p>1.9.5. City / municipal housing agencies established and active (UN-Habitat, UNHCR)</p> <p>1.9.6. UNHCR's Local Settlement Housing project is incorporated in the social housing fund (UNHCR)</p>
MDG: 7	
<p>Role of Partners: Serbian Ministry of Capital Investments, hosting Housing Department and drafting and developing housing policy, Serbian Ministry of Finance coordinating financing institutional arrangements, UN Economic Commission for Europe (UNECE), Stability Pact MARRI & Social Cohesion Initiatives. Donors: Italy, CEB.</p>	
<p>1.10. Budget structure and data collection established which allows for review of budget allocations for children (UNICEF, WHO)</p>	<p>1.10.1. Analysis of State budget allocation for children and review of allocation yearly (UNICEF)</p> <p>1.10.2. Children's visibility in budgeting is increased (UNICEF)</p> <p>1.10.3. Review and monitoring of public spending on social services is enhanced (UNICEF)</p> <p>1.10.4. DevInfo system is in place and used at Member States and municipal levels (UNICEF)</p> <p>1.10.5. A special budget line is allocated ensuring sustainable vaccine supply for all children (UNICEF, WHO)</p>
MDGs: 1, 2 and 4	
<p>Role of Partners: SCG member states' governments and Ministries of Finances (MoF) to lead on review of budget lines in annual budget; Council for Child Rights of the Republic of Serbia and Committee for Child Rights of Montenegro, as well as SCG member states' NGOs have advisory and monitoring role. ' Statistical Offices to maintain DevInfo data collection based also on municipal inputs; Member States' Parliaments; Potential partners: CIDA</p>	
<p>UNDAF Outcome: Efficient, accountable and people-centred public sector</p>	

Coordination, Implementation and Programme Modalities:

UNCT to meet regularly to review overall progress towards the UNDAF goal, UNAIDS Theme Group, Ministries lead on education, health and the social sector and use existing coordination mechanisms. Coordination mechanisms on the environment to be established, UN agencies will participate in member states' committees on breastfeeding, food policy and iodine, Data & Information Systems TG. Inter-sectoral commissions monitor implementation of National Environmental Health Action Plan (NEHAP) and reports and other future coordination mechanisms.

RM Targets:

UNDP regular resources US\$ 1.5 M

Other Resources US\$ 21 M (SCG member states' C/S to be determined; Third party: US\$ 17 M; GEF: US\$ 3 M; TTF: US\$ 1 M)

UN-Habitat: US\$12.2 M donor US\$3.66 M from municipalities

WB lending 2006-2009 for macro-economic stability and governance US\$ 8 M, for health projects US\$ 22 M (US\$ 15 M for Serbia disbursement 2004-2008 and US\$ 7 M for Montenegro disbursement 2005-2009), for education projects tentative investment 2006-2009 at US\$ 32 M (US\$ 8 M annually)

B Judicial Reform & the Rule of Law

SCG Priority: Restoring respect for the rule of law and confidence in the judicial system and realizing the rights of vulnerable groups.

UNDAF Outcome: Strengthened rule of law, equal access to justice and the promotion of rights

Country Programme Outcomes

2.1. **A judicial system that includes an independent and efficient judiciary and alternative dispute mechanisms in place** (OHCHR, UNDP, UNICEF)

MDGs: 1-8

Country Programme Outputs

- 2.1.1. A stronger bar association able to set high professional standards to both support and monitor the conduct of lawyers (OHCHR)
- 2.1.2. Legal professionals meet higher standards of performance when providing free legal aid to the vulnerable (OHCHR)
- 2.1.3. Developed code for children and specialisation of the judicial system for children and child rights at all relevant levels and instances (OHCHR, UNICEF)
- 2.1.4. Alternative dispute resolution mechanisms introduced in the law (OHCHR)
- 2.1.5. Professional advancement of judges, prosecutors and support staff (UNDP)
- 2.1.6. Increased international judicial cooperation (UNDP)
- 2.1.7. Reformed judiciary and magistrature, exposed to global best practice (UNDP)
- 2.1.8. Reformed Ministries of Justice (UNDP)
- 2.1.9. Trained and certified legal professionals (UNDP)

Role of Partners:

SCG member states' Ministries of Justice, court, prosecutors and magistrates' structures to provide commitment to ensure budgeting incremental SCG member states' cost-sharing over time; Judicial Training Centre to organize training, NGO Centre for the Training of Montenegro Judges, professional associations to help identify training needs, NGOs to participate in capacity building training for legal aid provision. International partners: EAR, WB, OSCE, Council of Europe, DFID, SIDA,

Netherlands, USAID, Germany.	
2.2. SCG & SCG member states' capacity strengthened and mechanisms put in place to facilitate compliance with international human rights obligations (IOM, OHCHR, UNDP, UNHCR, UNICEF)	2.2.1. Increased ministerial capacity on human rights treaty reporting (OHCHR, UNDP, UNICEF)
	2.2.2. Increased capacity of civil society organizations to report on CRC, CEDAW and other human rights convention treaties (OHCHR, UNICEF)
	2.2.3. Legislation reform processes relevant to children are informed by international expertise and standards (UNICEF)
	2.2.4. Increased capacity of the SCG member states' Ministries of Justice on migration management (IOM)
	2.2.5. Increased involvement of academia on migration, children and human rights (IOM, UNICEF)
	2.2.6. Enhanced knowledge and expertise on international refugee protection regime among government officials, lawyers, judiciary, civil society and human rights institutions (UNHCR)
	2.2.7. Increased SCG member states' capacity to develop asylum policies and establishment of an asylum structure in accordance with international law and standards and obligations deriving from the 1951 Refugee Convention. (UNHCR)
	2.2.8. Reception Centres and referral systems for asylum seekers and refugees established by 2004-05. (UNHCR)
	2.2.9. Drafting Committee established by the Ministry of Foreign Affairs of SCG and framework Law on Asylum & Refugees adopted (UNHCR)
	2.2.10. SCG member states' refugee status determination procedures established (UNHCR)
	2.2.11. Alignment of legislature laws with to-be revised member state Constitutions compatible with European norms (UNDP)
	2.2.12. Cooperation with the ICTY is strengthened (ICTY)
	2.2.13. Serbian courts and prosecutor offices empowered to effectively investigate and prosecute war crimes (ICTY, OHCHR, UNDP)
MDGs: 1-8	
Role of Partners: SCG Member States' Ministries of Interior, NGOs SCG Member states' Governments lead on this issue and undertake broad consultations, in particular involving civil society and specialized bodies in the reporting process. NGOs prepare shadow Human Rights report to share in depth analysis of critical areas of concern. Academics, Universities and Faculties shall take the opportunity to integrate children's rights and international standards into curricula. International Partners: EAR, WB, OSCE, DFID, USAID, CIDA. Council of Europe has started the adoption procedure of the Revised European Social Charter in SCG member states.	
2.3. Effective SCG member states' human rights institutions established and functioning (OHCHR, UNDP, UNICEF)	2.3.1. Ombudsman's office in Serbia (the Public Advocate) and in Montenegro (the Protector of Human Rights) supported with human rights expertise, assistance, and training. (OHCHR, UNDP)
	2.3.2. Increased expertise of ombudsman-system dedicated to children's rights and issues (UNICEF)
Role of Partners: Ministry for Human & Minority Rights of SCG report on conventions, Montenegrin Ministry for Minority Protection, Serbian Ministry of Justice, and Human Rights-based NGOs preparing shadow convention reports.	
2.4. Juvenile justice system reformed in line with international standards (UNICEF)	2.4.1. The use of diversion measures (as alternative to legal proceedings) is introduced as a standard method of care for children in conflict with the law (UNICEF)
	2.4.2. Community-based mechanisms for reintegration of juvenile offenders introduced (UNICEF)
	2.4.3. Professionals dealing with children in conflict with the law know of international treaties and restorative justice principles (UNICEF)

	2.4.4. Legislation for children in conflict with law is in line with international standards (UNICEF)
<p>Role of Partners: Member States' relevant ministries (justice, interior, labour and social affairs, education) and Council/ Committee for children's rights in Serbia and Montenegro) incorporate children in conflict with the law as a distinct priority in the overall reforms and all initiatives. They also lead on developing alternative measures/sanctions within the reform of the juvenile justice system are comprehensive and coordinated among sectors. Municipalities, national and local NGOs participate.</p>	
<p>2.5. Prevention and response structures in place to address violence, abuse, neglect and exploitation (IOM, OHCHR, UNHCR, UNICEF, WHO)</p>	<p>2.5.1. Increased capacity of SCG member states' and local authorities to develop policies and mechanisms to effectively prevent and respond to violence, abuse, neglect and exploitation of children (OHCHR, UNICEF)</p> <p>2.5.2. Increased capacity of SCG member states' and local authorities to develop policies and mechanisms to effectively prevent and respond to sexual and gender-based violence among refugees and IDPs (OHCHR, UNHCR, WHO)</p> <p>2.5.3. Standards for referral mechanisms for children victims of trafficking in place (OHCHR, UNICEF)</p> <p>2.5.4. Safe house system for victims of human trafficking in place (IOM)</p> <p>2.5.5. Increased capacity of local authorities to develop mechanisms to effectively provide protection to victims of trafficking including through the IOM SCG member states' and regional programmes (IOM, OHCHR)</p>
MDG: 3	
<p>Role of Partners: Member States' relevant Ministries and Council/Commission for Child Rights in both Member States lead on policies for prevention and response to violence, abuse, neglect and children trafficking. Member States' relevant Ministries review legal instruments and provisions and oversee implementation of the policy and creation of referral systems for children victims of violence, abuse, neglect and trafficking. NGOs as well as CSOs will have an opportunity and delegated responsibility to be an integral part of the SCG member states' referral mechanisms.</p>	
<p>2.6. All people have access to information and knowledge on children's and women's rights (OHCHR, UNICEF)</p>	<p>2.6.1. Media are a leading force for promoting, monitoring and reporting on children's and women's rights (OHCHR, UNICEF)</p> <p>2.6.2. Code of ethical reporting on children's and women's rights is adopted (UNICEF)</p> <p>2.6.3. Public action for policy change for children's and women's rights is mobilised (UNICEF)</p>
MDG: 3	
<p>Role of Partners: SCG member states' media and media associations develop codes for ethical reporting on child rights; media associations organise media training. SCG member states' Child Rights councils advocate for media training and involve them in National Plan of Action monitoring. Potential partners: Stability Pact (Media working group)</p>	
<p>UNDAF Outcome: Strengthened rule of law, equal access to justice and the promotion of rights</p>	
<p>Coordination, Implementation and Programme Modalities: Overall UNCT coordinating, monitoring and planning TG for UNDAF outcome, National Coordination Task Force to Combat Human Trafficking, Gender & Child Protection WG, IDP WG, Judicial Training Centre Advisory Board, Human Rights Contact Group and other future coordination mechanisms.</p>	

RM Targets:

UNDP Regular resources: US\$ 800,000

Other resources: US\$ 24 M (Govt C/S: US\$ 10 M; Third party: US\$ 14 M)

WB provisional plan for support in judicial system 2006-2009 US\$ 8 M (US\$ 2 M annually)

C Sustainable Development**SCG Priority:** Reduced regional economic, social and environmental disparities**UNDAF Outcome:** To promote sustainable development and increase capacity at municipal level

Country Programme Outcomes	Country Programme Outputs
3.1. Sustainable development plans effectively respond to the need of all people, communities and the private sector, and promote rural development and environmental protection (FAO, UNDP, UN-Habitat, UNHCR, UNICEF, WHO, WTO)	3.1.1. Improved methodologies and capacities for participatory strategic local development planning (UN-Habitat)
	3.1.2. Local development agencies established in the selected municipalities in Serbia (UN-Habitat)
	3.1.3. Increased sensitivity of local authorities to the needs and rights of vulnerable groups including refugees and IDPs (UNDP, UNHCR, UNICEF, WHO)
	3.1.4. Self-support mechanisms, awareness of rights and inclusion of vulnerable groups enhanced (UNDP, UNHCR, UNICEF, WHO)
	3.1.5. Action Plan for education for rural people is embedded within the Government of Serbia's education framework (FAO)
	3.1.6. Forestry policy and strategy for the forest sector developed in Serbia, including private forestry development (FAO)
	3.1.7. Forest protected from Gypsy Moth outbreak in Serbia (FAO)
	3.1.8. Programme and institutional framework developed for conservation and using plant genetic resources for food and agriculture in Serbia (FAO)
	3.1.9. Improved land management practices and improved legal and institutional framework are established (FAO)
	3.1.10. Access to land and secure property rights for Roma (FAO)
	3.1.11. SCG member states' civil society-private sector working groups on environmental protection established in selected municipalities and linked to the sustainable development councils (UNDP)
	3.1.12. Strengthened protection of the natural and cultural environment through training programmes in rural areas (WTO)
	3.1.13. Localization of the MDGs (UNCT)
MDGs; 1-8	3.1.14. Local plans of action for children are in place in municipalities, implemented and monitored (UNICEF)
	3.1.15. Local plans of action for environmental health developed, implemented and monitored (UNICEF, WHO)
	3.1.16. Local plans of action for Children Environmental Health developed, implemented and monitored (UNICEF, WHO)

Role of Partners:

Municipal governments, private sector, NGOs, Standing Conference of Towns and Municipalities, Serbian Ministry for Public Administration and Local Self-Government, and participating municipalities to provide leadership in reforms, SCG Member States' Ministries in charge of Social Affairs, Health, Environment, Labour and Education, Agriculture and Water Management. International partners: EAR, CEB, EBRD, Rockefeller Brothers Foundation, ILO, GEF, OSCE, FIC, OECD, SEED/IFC, Germany, Italy, SDC, CIDA, UNECE.

WB preliminary plan for local sustainable development: reduce local and global environmental impact of the use of dirty fuels for heating in Serbia, making heating

more affordable by improving end-use energy efficiency, improve safety of drinking water, promote poverty-reducing rural growth, and fiscal decentralization.	
3.2. Improved enabling environment for local economic development (FAO, UNDP, UNHCR, WTO)	<p>3.2.1. Socially sensitive Public-Private-Partnerships established to increase business knowledge and skills of current and potential entrepreneurs (UNHCR)</p> <p>3.2.2. Increased dialogue between business leaders and small-scale entrepreneurs to tap into domestic resources (UNHCR)</p> <p>3.2.3. Improved local finance and economic development policies (UNDP)</p> <p>3.2.4. Local development agencies established in 11 southern Serbian municipalities, Novi Sad & Kragujevac (UNDP)</p> <p>3.2.5. Increased commitment of private sector to the global compact (UNDP)</p> <p>3.2.6. Employment creation established under area-based schemes in the poorest regions (UNDP)</p> <p>3.2.7. Noticeable net local economic stimulus and SME growth (UNDP)</p> <p>3.2.8. Increased income, profitability and competitiveness of small and medium scale farmers through the provision of demand driven advisory services (FAO)</p> <p>3.2.9. Systems of direct support and advisory services to encourage participation by the private sector in rural tourism development (WTO).</p>
MDGs: 1-8	
Role of Partners: Local governments, NALAS (Network of Associations of Local Authorities in south-east Europe), Standing Conference on Towns and Municipalities, WB, EAR, USAID Potential: Japan, Germany, OSCE	
3.3. Preparedness for natural and man-made disasters improved to foresee potential disasters, to prevent or minimize their impact, respond adequately and mitigate the consequences. (UNDP, UNICEF, WHO)	<p>3.3.1. Member States' Security Strategies developed and Civil Protection structures against natural disasters improved and harmonized with international standards (UNDP, WHO)</p> <p>3.3.2. Emergency preparedness, response and contingency planning for potential natural and man-made disasters' scenarios established (UNDP, WHO)</p> <p>3.3.3. Preventive measures in place to lower the impact in the event of a natural or man-made disaster (UNDP, WHO)</p> <p>3.3.4. Communication and post emergency care strategies developed (UNDP, UNICEF, WHO)</p> <p>3.3.5. Early Warning System for Communicable Diseases and Preparedness for the deliberate use of biological agents s fully functional in both Member States – and adequate response system in place (WHO)</p>
MDG: 7	
Role of Partners: Ministry of Defence of SCG, Member States' Ministries of Interior, Ministries in charge of education, Ministries of Health, State Union and Member States' Red Cross, International Red Cross family. Potential partners: EAR, OSCE.	
3.4. People are aware of their rights, are able to claim them and participate in policy and planning processes (UNDP, UN-Habitat, UNICEF, WHO)	<p>3.4.1. Civil servants' knowledgeable about mechanisms for involving civil society in policy formulation and service delivery (UNDP, WHO)</p> <p>3.4.2. NGOs and CSOs are able to monitor and evaluate social service delivery (UNDP, UNICEF, WHO)</p> <p>3.4.3. Increased awareness of roles and functions of NGOs amongst the public and parliaments (UNDP)</p> <p>3.4.4. Participation mechanisms in place for civil society at Municipal level (UNDP, UN-Habitat, UNICEF)</p>

MDGs: 1-8	3.4.5. Service deliverers are knowledgeable about rights of and inclusive mechanisms for vulnerable groups (UNICEF, WHO) 3.4.6. Advanced decentralization agenda to enable CSOs to participate in municipal activities (UNDP)
Role of Partners: Municipal governments, private sector, NGOs, Member States' to ensure standards for service delivery. Cooperation and support to local government and NGOs in implementation of the NPA, focus on Parents Association, Youth Clubs, community/youth leaders, to help them to participate and claim their rights and monitor social service delivery. Cooperation with local authorities, schools and centres for social welfare to raise awareness of children's rights, and to increase knowledge about the rights and inclusive mechanisms for vulnerable groups. Ministry of Human and Minority Rights of SCG, Human Rights NGOs, Media. International Partners: EAR, WB, EU, FOSI and bilateral donors.	
3.5. All children have birth registration (UNICEF)	3.5.1 Parents and primary care-givers know the obligation and steps to be taken to register their child (UNICEF) 3.5.2 Primary caregivers from deprived families referred to registration points (UNICEF)
MDGs: 1-8	
Role of Partners: Local authorities and SCG member states' lead with the support of NGOs and CSOs to work on identification of non-registered children, education of primary caregivers and inclusion into the social system.	
3.6. Primary caregivers and communities are knowledgeable and provide proper care, nutrition and safe environment for children (UNICEF)	3.6.1. Characteristics of existing family care practices identified (UNICEF) 3.6.2. Primary caregivers have increased awareness of their rights to basic services (UNICEF) 3.6.3 Primary caregivers apply better care and have improved interaction with children (UNICEF) 3.6.4 Primary caregivers know how to prevent and are able to recognize common childhood illnesses (UNICEF) 3.6.5 Children participate in decision-making related to their health and development according to their developmental capacity (UNICEF)
MDGs: 1,2,3,4 and 7	
Role of Partners: Community stakeholders, CSOs, professionals dealing with children, primary caregivers, local authorities work in a participatory way on identification and realization of their needs, increasing skills and knowledge taking into consideration the opinion of young children.	
3.7. Improved SCG member states' network of employment services and strengthened employment promotion policies. (UNDP)	3.7.1 Serbian Ministry of Labour, Employment & Social Affairs and selected municipalities jointly conceive and conduct active labour market policies (UNDP) 3.7.2 Level of direct and secondary employment in rural areas increased through people orientated rural tourism and economic diversification, particularly for women and young people (WTO)
MDG: 1	
Role of Partners: WB, DFID, EAR, USA, bilateral donors	

UNDAF Outcome: To promote sustainable development and increase capacity at municipal level
Coordination, Implementation and Programme Modalities:
 Future coordination mechanisms for Disaster Management, Municipal Level Planning (1 in Belgrade, 1 in Podgorica), to be developed.

RM Targets:

UNDP Regular resources: US\$ 1 M

Other resources: US\$ 39 M (SCG member states' C/S: US\$ 14 M; Third party: US\$ 18.5 M; TTF: US\$ 1.5 M; GEF: US\$ 5 M)

UN-Habitat: US\$ 3 M

FAO: US\$ 5 M to be funded by potential donors

WB: Energy efficiency projects in Serbia US\$ 21 M IDA credit 2006-2008 (US\$ 6 M annually), and US\$ 6 M from GEF. Municipal water and sanitation, water resources project and irrigation project, tentative investment 2006-2009 US\$ 40 M (US\$ 10 M annually)

5. Estimated Resource Requirements

This table will be updated during the course of the UNDAF's life-cycle. The current snap-shot resource picture it provides includes core resources where known and resource mobilisation targets for the five-year UNDAF life-cycle.

UNDAF Areas of Cooperation Agencies' (core and other resources) 2004 - 2009	A Institutional Reform and Public Administration Reform (US\$)	B Judicial Reform & the Rule of Law (US\$)	C Sustainable development (US\$)	Total per Agency (US\$)
FAO				5 M
OHCHR		6 M		6 M
UNDP	38.5 M	24.8 M	40 M	103.3 M
UN-Habitat	16 M		2.4 M	18.4 M
UNHCR	450,000	3.2M	40,000	3.69 M
UNICEF				21.6 M
World Bank	62 M	8 M	67 M	137 M
WHO				1.5 M
Total	116.95 M	42 M	109.44 M	296.49 M

6. Monitoring and Evaluation

In order to achieve effective monitoring and evaluation of the three UNDAF outcomes, the issue of the quality and quantity of available indicators emerged over again during the CCA/UNDAF process. Quality data shortages and member states' institutional weaknesses in collecting pertinent data makes tracking progress and trends difficult. Huge improvements could be realised in public access to information and data. Member states, through the PRSPs, are undertaking the vital measures necessary to indigenize the MDGs through adopting SCG member states' relevant targets and indicators for each MDG goal, as well as commitments made at international conferences and international human rights instruments. The establishment and maintenance of a SCG member states' MDG database will support this process through building modernized statistical capabilities. The UN system, with other development actors, will engage in this process. When achieved, monitoring and evaluation of UNDAF and other development strategies will be more effective. DevInfo – a development software currently known as ChildInfo, will be a useful tool at national and local level to capture and display information about people and development. It will be rolled out through the country.

Besides institutionalised mechanisms for data collection and reporting, for the UNDAF monitoring and evaluation process, the UN Country Team will also rely on annual reports, reviews and surveys prepared by the SCG member states', UN agencies, fellow international organizations, development partners, NGOs and think tanks.

Note: The M&E Framework indicators will be further developed in close consultations with relevant SCG member states ministries.

M&E Framework

A Institutional Reform and Public Administration Reform			
UNDAF Outcomes	Indicator(s) and Baselines	Sources of verification	Risks and Assumptions
1.1. Improved efficiency, accountability and transparency in the civil service (UNDP)	Indicators: a) Number of reforms introducing modern management systems b) Case load of an operational Supreme Audit Institution c) Cases of institutional involvement of civil society in the design and evaluation of public policies d) 1.1.3. Number of Law Proposals that have passed quality public consultations prior to entering parliamentary procedure e) 1.1.10. Percentage of health indicators monitored on population level (averages), disaggregated by sex, age, region, socio-economic status and ethnicity, and population averages compared with achievements of the lowest income quintile for the respective indicator. f) 1.1.11. SCG member states' health database for monitoring health related MDGs is set up. g) Number of identified SCG member states' MDG targets. h) 1.1.12. Disability - adjusted life expectancy in years. i) Health expenditure per capita.	Independent research, auditing reports; enacted legislation, NGO reports	Unstable SCG member states' and frequent personnel changes in core ministries, which could influence discontinuity in the reform process.

	<p>j) Public expenditure as % of total expenditure on health.</p> <p>Baseline:</p> <ul style="list-style-type: none"> a) Few systems of modern management in place b) No independent audit of public spending c) Civil society largely excluded from the policy process d) Under consideration e) 0% of currently monitored health indicators have been disaggregated by sex, age, region, ethnicity and socio-economic stratum. f) No SCG member states' health data base for monitoring health related MDGs. g) 0 h) 82 per 1 000 population (source: Burden of Disease Study for Serbia). i) 109 USD <p>Target</p> <ul style="list-style-type: none"> e) 100% of all monitored health indicators are disaggregated by sex, age, region, ethnicity and socio-economic stratum. f) SCG member states' health data base for monitoring health related MDGs is established. g) 13 i) 200 USD j) under consideration 		
<p>1.2. Preconditions for optimal development for young children ensured (UNICEF)</p>	<p>Outcome Indicator: Percentage of children who are attending some form of organized early childhood education programme desegregated by age, gender, type of settlement, ethnicity.</p> <p>Output indicators:</p> <ul style="list-style-type: none"> 1.2.1. <ul style="list-style-type: none"> a) Policy developed b) Monitoring mechanisms for policy implementation established 1.2.3. c) Number of preschool initiatives developed by parents and local communities. 1.2.4. d) Number of professionals trained applying IECD policies and practice in targeted municipalities. 1.2.5. g) Number of diversified models for preschool education in place. 1.2.6. h) Number of professional staff applying new methods of pre-school education. <p>Baselines:</p>	<ul style="list-style-type: none"> a) MICS 2, Statistical office reports* b)-h) Ministries in charge of Education in SCG Member States Reports, UNICEF Annual Reports 	<p>Young children not seen as priority by decision-makers and insufficient budget allocated for their optimal development; Marginalised populations and groups not included in the system.</p> <p>The ways to overcome those obstacles are strong and continuous advocacy efforts by all stakeholders to demonstrate that investment in young children is in the strategic interests of the State.</p>

	<p>a) 31.4% (*22%)</p> <p>b) New legislation on Pre-school Education in Serbia adopted; in Montenegro drafted;</p> <p>c) d) h) No baseline</p>		
<p>1.3. All children, especially the most disadvantaged and vulnerable ones have access to and complete primary education of good quality (UNICEF)</p>	<p>Indicators</p> <p>1.3.2.a) % of children from the excluded groups: Roma, children with disabilities, children in remote areas, IDPs, reach grade 6, complete primary education and continue secondary education disaggregated by gender for Serbia and for Montenegro.</p> <p>1.3.3. b) Number of schools applying inclusive practices. Number of developed school-based inclusive programmes</p> <p>1.3.7. c) % of teachers enabled to apply child-centred and inclusive practices</p> <p>1.3.7. d) Number of school boards acquainted with child-centred education</p> <p>1.3.8. e) % of representatives of vulnerable groups in school boards</p> <p>1.3.1. f) % of children who acquire basic knowledge and skills by the end of primary education</p> <p>1.3.4. g) % of children with private tuition</p> <p>1.3.6. h) Number of child-friendly schools</p> <p>i) Number of Roma IDP children enrolled in local schools. (UNHCR)</p> <p>j) Number of Roma IDP children drop-out rate decreased. (UNHCR)</p> <p>Baselines:</p> <p>a) No baseline data disaggregated by specific target groups and on school retention. Primary school gross enrolment in 2000 is 98,31% Secondary school enrolment rate 79.6%</p> <p>b), d), e), f), h) No baseline (f) information available from small scale researches and UNICEF Comprehensive Analysis of Primary Education</p> <p>c) Baseline from 2003 in AL evaluation</p> <p>g) Baseline: 17.7%</p>	<p>a) Bureau of National Statistics and PRSP, SLSP, Comprehensive Analysis of Primary Education in FRY? (excluding Kosovo), UNICEF/UNESCO 2000.</p> <p>g) PRSP, SLSP</p> <p>* Assessment of children who are excluded and hidden drop out (Roma, disabled)</p> <p>Girls education survey</p> <p>SCG member states' education statistics and surveys</p> <p>EIS</p> <p>MICS</p> <p>PISA testing and other standardised knowledge tests</p> <p>External evaluation of Active Learning</p> <p>External evaluation of civic education programmes in Montenegro</p> <p>PRSP monitoring</p> <p>NPA monitoring</p>	<p>Unsecured funding at local level in the process of decentralisation may particularly affect poor municipalities.</p> <p>Unstable SCG member states' and frequent changes in the Serbian Ministry of Education and Sports which could bring discontinuity in the education reform</p> <p>Strong political influence on school boards at the local level.</p>
<p>1.4. Universal access to quality primary health care ensured (UNICEF, WHO)</p>	<p>Outcome Indicators:</p> <p>a) Infant mortality rate</p> <p>b) Under-five mortality rate</p> <p>c) Maternal mortality ratio</p> <p>d) Percentage of young children having access to quality health services</p> <p>e) Proportion of births attended by skilled health personnel</p> <p>f) Proportion of women aged 15-49 attended by skilled health personnel during pregnancy</p> <p>g) Percentage of young people accessing to quality youth friendly</p>	<p>a) b) CCA, (2002)</p> <p>c) CCA, (2001)</p> <p>e) CCA, (2001)</p> <p>i) MICS 2</p> <p>k) Brave New Generation, 2002</p> <p>m) Health Law</p>	<p>No mechanisms for inclusion of marginalized population groups into the health system developed. Very low participation of population in designing and functioning of health services.</p>

	<p>services</p> <p>Output Indicators:</p> <p>1.4.1. Proportion of inter-sectoral bodies, which involve NGOs and/or CSOs representatives.</p> <p>1.4.1. h) SCG member states' plans of actions for maternal and childhood, including young people's health developed in a participatory manner</p> <p>1.4.2. i) Proportion of women who are using a contraceptive method</p> <p>1.4.2. j) Incidence of sexually transmitted infections among adolescents</p> <p>1.4.2. k) Prevalence of smoking among adolescents</p> <p>1.4.3. l) Protocols and guidelines developed</p> <p>1.4.3. m) Number of MCH health professionals implementing IMCH</p> <p>1.4.6. n) Case notification rate for TB.</p> <p>1.4.6. o) DOTS coverage.</p> <p>1.4.6. p) Number of TB (all forms) deaths per 100 000 population per year.</p> <p>1.4.7. q) Quality assurance systems (licensing board and accreditation board) set up.</p> <p>Baselines and Targets:</p> <p>a) IMR 9.6%.</p> <p>b) Under five 10.9%;</p> <p>c) 10.31%.</p> <p>d), f), g), h), j), l) Not available</p> <p>e) 98.90%</p> <p>i) 58.3%</p> <p>k) Available for young people age 15-24: 57% young women and 64% of young men</p> <p>m) 50%</p> <p>1.4.1. 0 Target: 100%</p> <p>1.4.6. n) 36 per 100 000; Target: 25 per 100 000.</p> <p>o) No DOTS in the country at present; Target: The same as the target in GFATM proposal (100 %)</p> <p>p) 0.153 Target: Under consideration</p> <p>q) No quality assurance systems set up. Target: Quality assurance systems established.</p>		<p>Services are not people-centred.</p> <p>Health professionals are not motivated for providing quality services.</p> <p>Those obstacles should be overcome with adequate legislative measures, proper training of health professionals and enabling full participation of service beneficiaries in service design and functioning.</p>
<p>1.5. 90 percent of children in every district of the country fully protected from vaccine preventable diseases in a sustainable way (UNICEF)</p>	<p>Outcome indicator</p> <p>a) Percentage of children vaccinated against diphtheria, tetanus, pertussis, poliomyelitis, tetanus and measles disaggregated by district and gender</p> <p>Output indicators:</p> <p>1.5.1 b) Annual number of AFP cases</p>	<p>a) Routine health statistics, MICS</p> <p>b) Routine health statistics, IPH Serbia, 2004 (still prepared) – Immunisation implementation results in 2003</p>	<p>Insufficient budget allocation; Local production of vaccines ruined; Immunization of marginalized not seen as a priority by SCG</p>

	<p>1.5.1 c) Annual number of cases of polio 1.5.2 d) Annual number of under-five deaths due to measles 1.5.2 e) Annual number of cases of measles in under-five children 1.5.2 f) Annual number of cases of maternal tetanus 1.5.2 g) Annual number of cases of neonatal tetanus 1.5.5. h) Number of new and underused vaccines introduced into immunization calendar 1.5.6. i) Number of local community teams for identification of non-vaccinated children established 1.5.7 j) Number of non-vaccinated children identified 1.5.7 k) Number of identified non-vaccinated children vaccinated 1.5.7 l) Number of non-vaccinated children included into health system (when needed) 1.5.7 m) Number of non-vaccinated children included into education system (when needed) 1.5.7 n) Number of non-vaccinated children included into social welfare system (when needed) 1.5.1. o) Annual rate of non-polio AFP cases per 100/000 children under 15. 1.5.1. p) Immunization coverage with OPV3 at the age of 12 months (6 months) disaggregated by district, gender, ethnicity and socio-economic status. 1.5.1. q) Regularity in WHO accreditation of SCG member states' laboratory for polio.</p> <p>Baselines: a) Coverage varies depending on antigen and region: 74.5-100% b) 18 cases in SCG c) 0% - (last case of poliomyelitis was registered in 1996) d) 0 cases in 2002 in Serbia, 0 case in 2001 in Montenegro e) 11 cases in 2002 in Serbia, 6 cases in 2001 in Montenegro f) 0% g) 0% (last 2 cases were registered in 1999) h)-n) Starting value 0 o) 1 per 100,00 p) 95% SCG member states' average, Roma population sample 24% Target: > 90 % for all population groups regardless to ethnicity and socio-economic strata. q) Irregular Target: Annual</p>	<p>c) Routine health statistics, IPH Serbia, 1997 – Immunisation implementation results in 1996 d) IPH Serbia, 2003 – Immunisation implementation results in 2002 e) IPH Serbia, 2003 – Immunisation implementation results in 2002 Health Statistical Yearbook of Montenegro, IPH f), g) IPH Serbia, 2003 – Immunisation implementation results in 2002, IPH Serbia, 2000 – Immunisation implementation results in 1999 h) – n) UNICEF Annual Reports</p>	<p>member states'. Strong advocacy efforts with all decision makers needed. Providing information to primary caregivers on importance of immunization will contribute to sustainable demand for vaccination.</p>
--	--	---	---

<p>1.6. Environmental health and environmental protection policies developed and management systems in place at all levels (UNDP, UNEP, UNICEF, WHO)</p>	<p>Outcome indicators</p> <ul style="list-style-type: none"> a) Percentage of children and women with low haemoglobin b) Proportion of live births that weigh below 2500 grams c) Severe and moderate malnutrition among under-five children d) Exclusive breastfeeding rate e) Continued breastfeeding rate f) Percentage of households using adequately iodised salt g) Median urinary iodine concentration in school age children <p>Output indicators</p> <ul style="list-style-type: none"> 1.6.1. h) NPA for nutrition developed and monitoring mechanism for policy implementation established 1.6.2. i) Protocols and guidelines for proper child nutrition practices developed 1.6.3. j) Legislation on IDD enhanced 1.6.4. k) Sustainable monitoring system for USI established 1.6.5. l) International Code for Breast milk substitutes adopted and monitoring mechanisms for the implementation in place 1.6.6. m) Functional Republican Tobacco Commission established as an inter-sectoral body. 1.6.6. n) Ratification of Framework Convention on Tobacco Control. 1.6.7. o) Development of National Environmental Health Action Plan. 1.6.8. p) Development of Children Environmental Health Action Plan. <p>Baselines:</p> <ul style="list-style-type: none"> a) 29.5 % children, 26.7% women b) 5% c) underweight 1.9; stunting 5.1; wasting 3.7 d) 10.6% e) 20.8 (12-15 months); 10.8 (20-23 months) f) 73.2% g) 158 mcg/lit h) – l) Partially developed or not in place m) No inter-sectoral body established n) Not ratified Target: ratified o) Inter-ministerial working group established. Target: NEHAP developed P) not developed Target: developed 	<p>MICS 2</p> <ul style="list-style-type: none"> b) End-decade report c-f) MICS 2 g) End-decade report 	<p>Environmental health not seen as a priority by the SCG member states. Strong and continuous advocacy efforts from all stakeholders needed to overcome this risk</p>
<p>1.7. All children and their families, especially excluded have access to quality social protection services (UNDP,</p>	<p>Indicators</p> <ul style="list-style-type: none"> a) Creation of comprehensive database to include groups traditionally at risk of exclusion (Roma, children with disabilities, children in remote areas, victims of abuse and neglect, refugees and IDPs) disaggregated 	<p>Member States' Ministries in charge of Social Affairs, Ministries of Justice, Ministries of Interior Affairs,</p>	<p>Potential difficulties to establish and maintain a quality and comprehensive</p>

<p>UNHCR, UNICEF)</p>	<p>by gender.</p> <p>b) Optimisation of database on children at risk (children victims of abuse and neglect, disabled children, children in conflict with a law) and referral mechanisms in place.</p> <p>c) Licensing of child protection services established and in use.</p> <p>d) % of nowadays-institutionalised children included in community-based alternatives.</p> <p>e) Vulnerable refugees and IDPs are provided with community-based care including accommodation in specialized care institutions. (UNHCR)</p> <p>f) Number of beneficiaries on welfare aid</p> <p>g) Number of beneficiaries covered through restructured social services (like day care centres for children, disabled, elderly, shelters for women, SOS lines)</p> <p>h) Ratio of beneficiaries on standard welfare aid and the ones covered through SIF</p> <p>i) Number of joint NGO-CSW projects through SIF</p> <p>j) Number of CSW staff trained</p> <p>Baselines (Data from 2002):</p> <ul style="list-style-type: none"> - 507,000 child allowance beneficiaries - 92,000 social cash benefits - 22,000 carer's allowance <p>- 10% of the population lives under the poverty line since their consumption by consumer unit is on average less than US\$ 72 per month, or 2.4 US\$ per day</p> <p>- Child Rights in Serbia 1996-2002, by Child Rights Centre</p>	<p>Ministries in charge of Education, Ministry for Public Administration and Local Self-Government, Council for Child Rights, Committee for Children's Rights, NGO sector, Local authorities, Parents Associations</p> <p>PRSP Monitoring and Evaluation reports, Member States' Ministries in charge of Social Affairs reports and surveys, SIF reports, reports of Monitoring Units supported by UNDP and the National Strategy for Resolving the Problems of Refugees and IDPs</p>	<p>database. Coordination between relevant sectors is still weak and will require additional efforts and building capacity of Member States' SCG member states'.</p> <p>Political instability or new Serbian government not ready to continue with reforming of the social protection system in line with the already established criteria. These risks may also influence the implementation of the PRSP and the National Strategy for Refugees and IDPs .</p>
-----------------------	---	---	---

<p>1.8. An effective SCG member states' system to prevent and respond to HIV/AIDS is in place (UNAIDS TG, UNICEF)</p>	<p>Indicators</p> <ul style="list-style-type: none"> a) HIV prevalence b) National Plan of Action for PMTCT c) % of pregnant women tested for HIV d) % of female adolescents who heard of HIV and those who have satisfactory knowledge of HIV e) % of adolescents sexually active and not using any type of protection f) Number of children living with HIV attending regular school g) Republican AIDS Strategy in both Serbia and Montenegro h) Republican Protocols for VCCT, PMTCT, treatment of PLWHA i) No of behavioural Sentinel Studies in Vulnerable Groups j) Republican System for M&E of response on HIV/AIDS k) Budgetary allocations for HIV/AIDS <p>Baselines:</p> <ul style="list-style-type: none"> a) 1,702 (Serbia) b) and f) – k) Not available c) 1% d) 90.9% & 20.4 e) 40% female and 20% male 	<ul style="list-style-type: none"> a), c) SCG member states' Health Statistics d) MICS 2 e) Brave New Generation (UNICEF) i) Official Report of Republican IPHs on state of Sexually Transmitted Diseases and HIV/AIDS 	
--	---	--	--

<p>1.9. A comprehensive social housing financing and implementing mechanism is established in Serbia to enable refugees and other vulnerable groups to access adequate shelter (UN-Habitat, UNHCR)</p>	<p>Indicators and targets</p> <p>a) Central social housing fund established. b) 10 local housing agencies established (baseline: 0) c) Adequate social housing on sustainable cost recovery basis provided for 2,100 people. d) Cost recovery rates in housing monthly annuities are above 90% e) Municipal Housing Strategies established in 7 municipalities (baseline: 0) f) Serbian Housing Strategy drafted and adopted (baseline: work started in 2003) (UN-Habitat)</p> <p>Indicators (1.10.6.)</p> <p>a) Social and Refugee Related Housing Secretariat (SRRHS) established within Ministry of Capital Investments. b) SRRHS prepared ground for creation of National Housing Agency in line with PRSP. (UNHCR)</p>	<p>Data from Ministry of Capital Investments, Ministries in charge of Social Affairs, Serbian Commissariat for Refugees and Municipalities</p> <p>Data from Municipal and other local administration sources (UN-Habitat)</p> <p>Reports from SRRHS. Evaluations and market analysis reports. SCG member states' communiqués and reports. (UNHCR)</p>	<p>Insufficient political support to the objective of the programme / establishment of Housing department and Fund for social housing in Government of Serbia; Municipal Housing Agencies established in cities and municipalities</p> <p>National housing strategy is adopted by Government of Serbia (UN-Habitat)</p> <p>National policy on social and affordable housing is in place. Credit lines are secured for affordable housing schemes. (UNHCR)</p>
<p>1.10. Budget structure and data collection established which allow for review of budget allocations (UNICEF)</p>	<p>Indicators</p> <p>1.10. 1. , 1.10.2. , 1.10.3</p> <p>a) % of funds allocated for children in Republican budget for social sectors (health, education, social welfare) b) % of funds allocated for children at municipal level 1.10.3. c) Balance of government expenditure on children against expenditure on other matters 1.10. 4 d) Number of local NPAs and “DevInfo” systems at local level</p> <p>Baselines</p> <p>a) - 2003 Republican Budget Law - 2002 WB Public Expenditure and Institutional Review b) c) d) no baseline</p>	<p>a) Annual budgetary tracking at republican level b) Annual budgetary tracking at municipal level c) Analysis on children's visibility in the budget</p> <p>Data from Ministries of Finance; Council on Child Rights and line ministries; municipal authorities; Statistical Offices</p>	<p>Unstable and frequently changed government can influence changes in budgetary priorities. Slow decentralisation process may influence budgeting at municipal level.</p>

B Judicial Reform & the Rule of Law			
UNDAF Outcomes	Indicator(s) and Baselines	Sources of verification	Risks and Assumptions
2.1. A judicial system that includes an independent and efficient judiciary and alternative dispute mechanisms in place (OHCHR, UNDP, UNICEF)	Indicators: a) % of reduced backlog b) % of reduced average trial duration c) % of cases solved through ADM Baseline: a) No current baseline available (450.000 cases for 2002) b) Average trial duration exceeds 2 years c) No baseline (UNDP)	Ministry of Justice Supreme Court Judicial Training Centre	Lack of political will and motivation
Additional qualitative indicators: (OHCHR) <ul style="list-style-type: none"> a) There exist effective legal guarantees, which ensure an independent judiciary with respect to tenure, appointments and dismissal procedures for judges and prosecutors. b) Improved conditions for judges: adequate remuneration, physical protection of judges and prosecutors. c) The system should be adequately funded to ensure independent judgment and resistance to inappropriate outside influence and to carry out its basic function in an expeditious manner. d) All crimes are thoroughly and judiciously investigated. e) The prosecution and conviction of perpetrators of crime is consistent and effective, regardless of the ethnic background or political connections of the victims or perpetrators. f) Procedural guarantees for fair trial, in conformity with international standards, are in place. g) All persons accused of serious crime are provided with free legal counsel if needed from the time they are arrested. h) The period of time that suspects are held while their cases are being investigated is as short as necessary and that the system of pre-trial release is enforced in a non-discriminatory manner. i) Alternative dispute mechanisms such as plea-bargaining and mediation are not only instituted but also routinely employed. j) Professional Codes of Conduct for judges, prosecutors, lawyers and other members of the penal system have been adopted. k) Misconduct by judges, prosecutors, attorneys, police, and penal system employees is routinely investigated and appropriately punished. l) Procedures for enforcing court judgments exist and are applied and court fines are consistently collected. m) The Bar Association, the Judges Association and the Magistrates Association function as credible professional self-monitoring bodies. 			
2.2. SCG & SCG member states' capacity strengthened and mechanisms put in place to facilitate compliance with international human rights obligations (IOM, OHCHR,	Indicators: a) Enhancement of legal knowledge on refugee protection among SCG member states' officials, NGOs, judiciary, lawyers and human rights institutions. (UNHCR) b) Number of training on Refugee Protection conducted. (UNHCR) c) Reception Centres for asylum-seekers established and referral system	SCG Member States' Ministries in charge of Social Affairs, Ministries of Justice, Ministries of Interior Affairs, Ministries in charge of	Technical knowledge in

UNDP, UNHCR, UNICEF)	<p>set up.(UNHCR)</p> <p>d) Law on Refugees adopted. (UNHCR)</p> <p>e) Competent central organ in charge of Refugee Status Determination established. (UNHCR)</p> <p>f) Number of cases with direct application of international norms and standards on human rights (UNDP)</p> <p>g) Increased public exposure to the International Human Rights Protection Mechanisms through the local media (viewers' ratings and scope of broadcasting of the material) (UNDP)</p> <p>h) Shadow reports and number of NGOs involved in reporting process to CRC Committee;</p> <p>i) The SCG member states' Reports to CRC Committee (UNICEF)</p> <p>Baseline:</p> <p>f) Single case of direct application of international norms</p> <p>g) No baseline</p>	<p>Education (and Sports), Ministry for Public Administration and Local Self-Government, Council for Child Rights, Committee for Child Rights, NGO sector, Local authorities, Parents Associations (UNICEF)</p> <p>Border Police, Civil Society. (UNHCR)</p> <p>Ministry for Human and Minority Rights of SCG Judicial Training Centre, Independent Research Agency (UNDP)</p>	<p>reporting process as well as lack of monitoring and evaluation tools. Challenge of information sharing and taking into consideration diverse sources between SCG member states' and NGO sector.</p> <p>Unstable political situation and absence of SCG member states' Partners and institutional framework in the field of asylum and subsequent lack of allocated competencies will slow down the process of establishing an asylum structure in the Country. (UNHCR)</p>
<p>Qualitative indicators on Human Rights Mechanisms: (OHCHR)</p> <p>a) Victims of human rights violations can seek redress through criminal or civil means and perpetrators do not enjoy impunity for their crimes.</p> <p>b) Victims of human rights violations receive compensation.</p> <p>c) Full cooperation with the International Criminal Tribunal for the former Yugoslavia (ICTY).</p> <p>d) War crimes not addressed by the ICTY are prosecuted in country.</p> <p>e) SCG has met all of its reporting obligations to the UN human rights treaty bodies and to the Council of Europe, and has taken steps to implement their recommendations.</p>			
<p>2.3. Effective SCG member states' human rights institutions established and functioning (OHCHR, UNICEF)</p>	<p>Baselines</p> <p>a) None</p>	<p>Ombudsman's offices (once established) and NGOs/CSOs, citizens</p>	<p>The concept of independent body where citizens can claim/redress for violation of their rights is new for the country. The information on the existence and the function of such offices needs to be broadly</p>

			disseminated.
<p>Qualitative indicators: (OHCHR)</p> <ul style="list-style-type: none"> a) The offices of the Public Advocate (Serbia) and the Protector of Human Rights (Montenegro) are adequately financed and staffed so as to function effectively and independently. b) These offices consistently monitor the compliance of governmental bodies with human rights standards and respond to reports of violations of domestic and international human rights standards. c) Statistics on individual cases taken up by the Offices, with data by gender, ethnicity, age, region, are published on a regular basis and readily available to the public. d) Mechanisms for the implementation of the recommendations of the Offices are in place and effectively utilized, and the SCG member states' respects these recommendations. e) SCG member states' legislation consistently reviewed by the Offices to ensure conformity with the standards contained in international and European human rights instruments. f) Police, judges, lawyers and penal system managers receive regular training in appropriate international and European human rights standards by the SCG member states' human rights institutions g) A SCG member states' Human Rights Action Plan is adopted. h) Human rights education has been introduced into the formal curricula of primary and secondary schools. i) Ombudsman offices for children established (UNICEF) j) Number and nature of cases referred and addressed in the offices of Ombudsman (UNICEF) 			
<p>2.4. Juvenile justice system reformed in line with international standards (UNICEF)</p>	<p>Indicators and targets</p> <ul style="list-style-type: none"> a) Establishment of pilot diversion schemes in 5 municipalities b) Community-based mechanisms for reintegration of juvenile offenders are introduced c) Number of children in conflict with the law diverted from formal legal proceedings and deprived of liberty. d) Proportion between the number of juvenile offenders receiving traditional sentencing measures and number participating in alternative measures and sentences. e) Comprehensive Juvenile Justice law is adopted f) Professionals dealing with children in conflict with the law know of international treaties and restorative justice principles <p>Baselines:</p> <ul style="list-style-type: none"> - UNICEF assessment on Juvenile justice in Serbia - National Plans of Actions for Children in Serbia and Montenegro - UNICEF assessment of Juvenile Justice System in Montenegro - National Strategy for Prevention of juvenile delinquency in Montenegro - Research on Juvenile delinquents in Serbia by Yugoslav Child Rights Centre 	<p>Member States' Ministries of Justice, Ministries in charge of Social Affairs, Ministries of Interior Affairs, Ministries in charge of Education (and Sports,) Ministry for Public Administration and Local Self-Government, Council for Child Rights, Committee for Children's Rights NGO sector, Local authorities, (UNICEF)</p>	<p>Heavy reliance on institutional care and retributive justice. In order to develop and maintain the alternative settings for implementation of alternative measures and sentences, the strong local development is needed, including developed infrastructure and participation of citizens that is still weak. Difficulties to harmonize and coordinate pace of reforms between legal, policy and institutional level.</p>

<p>2.5. Prevention and response structures in place to address violence, abuse, neglect and exploitation (IOM, OHCHR, UNHCR, UNICEF)</p>	<p>Indicators and targets</p> <p>a) General and Special Protocols to address CAN are created, tested, revised, endorsed by respective ministries, in place and acted upon</p> <p>b) Optimisation of data base on children at risk/victims of abuse and neglect and referral mechanisms in place</p> <p>c) % of professionals per sector (social protection, education, health police, judiciary) applying proactive and responsive strategies in addressing VANE</p> <p>d) Number of municipalities where initiatives to combat VANE are in place</p> <p>e) Centres exist throughout the country which provide legal assistance and/or advice to especially vulnerable groups – e.g., victims of domestic violence; victims of trafficking; children at risk of abuse, neglect or exploitation; Roma; the elderly; the disabled. (OHCHR)</p> <p>Baselines:</p> <ul style="list-style-type: none"> -Baseline study on nature and impact of violence against children in the country - National Strategy to prevent violence against women and children in Montenegro - Research about violence against women and children in Montenegro by SOS line. - The Report on trafficking in human beings in South Eastern Europe (ODIHR, OHCHR, UNICEF) 	<p>Member States' Ministries in charge of Social Affairs, Ministries of Justice, Ministries of Interior Affairs, Ministries in charge of Education, Ministry for Public Administration and Local Self-Government, Council for Child Rights, Committee for Child Rights, NGO sector, Local authorities, Parents Associations (UNICEF)</p>	<p>Challenge of recognition of existence of phenomena and overcoming paternalistically approach the issue.</p> <p>Challenge to develop structures and mechanisms because of hidden and cross-border nature of trafficking in children.</p>
<p>2.6. All people have access to information and knowledge on children's and women's rights (UNICEF)</p>	<p>Indicators</p> <p>2.6. 1. , 2.6.2.</p> <p>a) Number of quality and responsible media articles and footage on children's and women's rights in print and electronic media</p> <p>b) Number of media trained in ethical reporting on child rights</p> <p>2.6.3.</p> <p>c) Population's knowledge on children's and women's rights</p> <p>Baselines</p> <p>a) c) no baseline. A survey needed</p> <p>b) UNICEF's and partners' training of media</p>	<p>a) Analysis of print and electronic media.</p> <p>b) Survey/opinion poll of general public on their knowledge of child rights.</p>	<p>Lack of SCG State Members' strategy for developing the media sector, adoption of new media legislation and implementation of the already adopted laws.</p> <p>Refocusing of analytical media and investigative journalism towards entertainment programmes.</p>

C Sustainable development			
UNDAF Outcomes	Indicator(s) and Baselines	Sources of verification	Risks and Assumptions
<p>3.1. Sustainable development plans effectively respond to the need of all people, communities and the private sector, and promote rural development and environmental protection (FAO, UN-Habitat, UNHCR, UNDP, UNICEF)</p>	<p>Indicators and targets</p> <p>a) 15 trainers from national institutions trained in strategic planning training·</p> <p>b) 354 municipal staff and partners having received training in strategic planning</p> <p>c) 10% of Serbian Municipalities are engaged in strategic planning process with support of national institutions (baseline 0%)</p> <p>d) 6 Municipal development units / Agencies are established and operational (baseline 0) (UN-Habitat)</p> <p>e) Two self-sustainable micro-credit organizations established in Serbia.</p> <p>f) At least 5,000 loans disbursed per annum to small entrepreneurs among vulnerable population, including refugees and IDPs. (UNHCR)</p> <p>g) Eleven Municipal Development Committees (MDCs functioning in the municipalities of southern Serbia</p> <p>h) Number of municipalities in Serbia and Montenegro, which elaborate and adopted Local Sustainable Development Strategies, involving CSOs and the private sector (UNDP)</p> <p>Baseline [for g) h):</p> <ul style="list-style-type: none"> - 30 municipalities in Serbia and 2 in Montenegro have started “LEAP” (Local Environmental Action Plan). - 5 municipalities in Serbia adopted LEAP. - 5 districts in Serbia have started regional environmental action plans. <p>3.1.5. Indicators (FAO): An action plan for education of rural people adopted.</p> <p>Baselines: No baseline information for educational needs for rural people.</p> <p>3.1.6. Indicators:</p> <p>a) Implemented Forest legislation and policy in Serbia</p> <p>b) Increased participation of private sector</p> <p>c) Enabled/increased provision of forest goods and services to the market</p> <p>3.1.7. Indicators</p>	<p>Data from municipal and other local administration sources</p> <p>Municipal GIS and ICT tools. (UN-Habitat)</p> <p>Monthly and quarterly reports from two micro-credit organisations. SCG member states’ communiqués and reports. Local government’s communiqués and reports. (UNHCR)</p> <p>Lists of MDC members, records of meeting minutes and lists of projects approved</p> <p>Local Self Government (UNDP)</p>	<p>Municipal development units are maintained and strengthened</p> <p>Strategic development planning is adopted as a standard practice and extended to the whole country (UN-Habitat)</p> <p>Sustainable access to credit is enabled to target groups. (UNHCR)</p> <p>Political instability. Stagnation or reversal of decentralisation trends. (UNDP)</p>

	<p>% (or surface in ha) affected by gypsy moth</p> <p>Baseline 120,000 ha affected by gypsy moth in the past few years.</p> <p>3.1.8. Indicators</p> <p>a) Established Coordination Committee for Plant and Genetic Resources for Food and Agriculture (PGRFA)</p> <p>b) Developed national programme for PGRFA</p> <p>c) Trained staff for the national programme (FAO)</p> <p>3.1.9. Indicators:</p> <p>a) Average size of the agricultural land parcels increased.</p> <p>b) Number of land consolidation schemes started.</p> <p>3.1.10. Indicators</p> <p>a) % of Roma have secured access to land</p> <p>b) % of Roma engaged in agriculture</p> <p>c) % of have better access to housing and other social and physical infrastructure</p> <p>Indicators:</p> <p>3.1.13. Number of locally developed environmental health action plans harmonized with NEHAP. Target: Equal to number of LEAPs</p> <p>3.1.14. Number of locally developed children environmental health action plans harmonized with Children Environmental Health Action Plan. Target: Equal to number of LEHAPs.</p>	<p>Serbian Ministry of Education and Sport, University of Belgrade (Faculty of Agriculture), NGO Education forum, UNICEF, Serbian Ministry of Science and Environmental Protection (Forestry Directorate), Forestry Institute; Statistics Offices; Serbian Ministry of Agriculture, Forestry and Water Management (FAO)</p>	<p>The future lead agency can count on well-trained and committed specialists; Land consolidation efforts receive support by the municipalities and the local communities; The population of the pilot villages shows a keen interest in land construction; Cadastral maps and a complete ownership register exist; Local level spatial plans are available. An inter-disciplinary team of qualified trainers is available; Public opinion and programmes of the dominant political parties favour rural development and land consolidation. (FAO)</p>
<p>3.2. Improved enabling environment for local economic development (FAO, UNDP, UNHCR, UNICEF)</p>	<p>Indicators</p> <p>a) Number of Municipal Development Funds established and properly functioning</p> <p>b) Number of local economic development project actively supported</p>	<p>Municipal Economic Departments Chambers of Commerce Business Associations</p>	<p>Political instability making the business environment too risky.</p>

<p>3.4. People are aware of their rights, are able to claim them and participate in policy and planning processes (IOM, UNDP, UN-Habitat, UNICEF)</p>		<p>Reports of different international actors operating in Serbia, CSO reports, Official Gazette, reports of Monitoring Units supported by UNDP?, media reporting. (UNDP) NPA reports, PRSP reports, Data from municipalities and other local administration and NGO sources. Council for Child Rights of Serbia, Commission for Child Rights of Montenegro, Local authorities, schools, centres for Social Welfare, Parents Associations, Roma Network (UNICEF)</p>	<p>Political instability, new Serbian Government not ready to continue with further decentralization actions and with implementing overall democratization agenda and in social service delivery.</p> <p>Unstable municipal governance and frequent change of priorities at municipal level under political influence. Unsecured funding at local level for social initiatives could affect motivation and interest of local community. Discrimination against poor and vulnerable. Unstable financial and technical support to NGO sector. Slow decentralisation process.</p>
<p>Human Rights Indicators</p> <ul style="list-style-type: none"> a) Number of municipal authorities and staff trained in participatory mechanisms. b) Number of municipalities where joint municipal-CSO activities have been carried out. c) Number of municipalities in which the work of CSOs has been supported through allocations from municipal budget. d) Law on Local Self-Government improved to include mandatory financial support to CSOs and mechanisms for CSO participation in policy formulation and service delivery. e) Core legislation on association of citizens adopted. f) Number of CSOs trained in M&E activities. g) Number of CSOs undertaking M&E work. h) Number of municipalities in which the monitoring work of CSOs has been supported through allocations from municipal budget. i) Law on Local Self-Government improved to include mandatory financial support to CSOs and mechanisms for CSO participation in M&E activities. j) Provisions of SCG member states' sectoral social protection legislation allow CSOs to be granted with financial support to carry out Evaluation of social service 			

<p>delivery.</p> <p>k) % of citizens taking part in CSO activities.</p> <p>l) Number of CSOs registered.</p> <p>m) Number of Parliamentary Committees consulting relevant CSOs when assessing legislation to be passed.</p> <p>n) Core legislation on association of citizens adopted.</p> <p>o) Number of municipalities covered by participatory activities (participation of poor, vulnerable groups), number of implemented activities (referendums, initiatives)</p> <p>p) Number of Parents' Associations established and functioning</p> <p>q) Number of Youth Parliaments established and functioning</p> <p>r) Number of NGOs promoting children's and youth's participation</p> <p>s) % of total number of plans and policies where children and youth participated and claimed their right</p> <p>Baseline</p> <ul style="list-style-type: none"> - 60 municipalities (from a total of 179) had participatory policy planning training (USAID DAI programme). - Law on Local Self- Government has only provisional legal mechanisms for citizens and CSO involvement. - Basic core legislation on associations of citizens still not in place. - Public (90%) uninformed about scope and range of CSO activities, 1% population volunteers in CSO - 4,000 NGOs registered in Serbia - Provisions related to the operations of CSOs, media, protection of minorities and citizens' participation in public life require improvements. - Sectoral anti-discrimination measures in the field of education, health, employment, reflected in the Local Self-government legislation also needs to be addressed. (UNDP) <p>s) 3 Plans of Actions as NGOs established (Montenegro)</p> <p>t) 4 Youth Parliaments established</p> <p>u) Child Rights network established</p>			
<p>3.5. All children have birth registration (UNICEF)</p>	<p>Indicators: Proportion of children whose births are reported registered.</p> <p>Targets: Official birth date 100%;</p> <p>Baselines: Information not accurate. UNICEF identified few thousand children without birth certificates.</p>	<p>Statistical Office report Survey on births' registration report</p>	<p>It is existing, but not recognised that some Roma and IDP children are bypassed by the system of birth registration. Training of local authorities and CSOs on the issue, as well as training of parents from marginalised population groups on the right to birth registration needed.</p>
<p>3.6. Primary caregivers and communities are knowledgeable and provide proper care, nutrition and safe environment for children (UNICEF)</p>	<p>Indicators</p> <p>a) Percentage of caretakers who know at least 2 signs for seeking care immediately</p> <p>b) Percentage of ill children who received increased fluids and continued feeding</p> <p>c) Percentage of women who know the main ways of preventing HIV transmission</p>	<p>a-c) MICS 2 d-e) End of decade report f) Health Statistical yearbook 2000 FR Yugoslavia</p>	<p>Primary caregivers not aware of their rights and children-related obligations. Work with primary caregivers will increase their knowledge and skills and will create demands for</p>

	<p>d) Annual number of under-five deaths due to ARI. e) Annual number of under-five deaths due to diarrhoea f) Annual number of under-five deaths due to injuries and accidents</p> <p>Baselines a) 57.8% b) 100% c) 48.8% d) 189 deaths from ARI (SCG) e) 138 deaths from diarrhoea (SCG) f) 21 (first year of life)</p>		<p>fulfilment of all child rights. This will contribute to their participation into social life and work of local community.</p>
<p>3.7. Improved SCG member states' network of employment services and strengthened employment promotion policies. (UNDP)</p>	<p>Indicators a) Number of employment support services offered. b) Number of pro-active and budgeted employment policies promoted by local self-governments and/or lead Ministries. c) Number of Municipalities involved in temporary employment generation through refurbishment of buildings and vocational training initiatives. Baseline - 3 Municipalities currently involved</p>	<p>Data from Serbian Ministry of Labour, Employment and Social Affairs and municipal sources. Records of meeting minutes at central and local level with lists of sites refurbished including in the workforce long term unemployed, lists of unemployed given vocational training. Employment Bureaus. Ministries in charge of Labour and Employment in Serbia and in Montenegro.</p>	<p>Mobilisation of domestic resources drastically reduced due to adverse economic and political trend. Pervasive informal economic activities create problems in analysing the labour market situation and designing adequate policies.</p>

7. Acronyms and Abbreviations

ADM	Alternative Dispute Mechanisms	MoJ	Ministry of Justice
AFP	Acute Flaccid Paralysis	MoSA	Ministry of Labour, Employment and Social Affairs
AL	Active Learning	NGO	Non-Government Organisation
ARI	Acute Respiratory Infection	NEHAP	National Environmental Health Action Plan
BF	Breastfeeding	NPA	National Plan of Action
CAN	Child Abuse and Neglect	OCHA	UN Office for the Coordination of Humanitarian Affairs
CBO	Community-Based Organisation	ODA	Official Development Assistance
CCA	Common Country Assessment	ODIHR	OSCE Office for Democratic Institutions and Human Rights
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women	OECD	Organisation for Economic Cooperation & Development
CG	Montenegro	OHCHR	UN Office for the High Commissioner for Human Rights
CoE	Council of Europe	ORC	Office of the Resident Coordinator
CoEB	Council of Europe Bank	OSCE	Organisation for Security and Cooperation in Europe
CP	Country Programme	PISA	Programme of International Assessment of Students' achievements
CPHA	Canadian Public Health Association	PLWHA	People living with HIV/AIDS
CRC	Convention on the Rights of the Child	PMTCT	Prevention of Mother-To-Child Transmission
C/S	Cost-Sharing	PoA	Plan of Action
CSOs	Civil Society Organisations	PRSP	Poverty Reduction strategy Paper
CSW	Centres for Social Welfare	RBF	Rockerfeller Brothers' Fund
DAI		SALW	Small Arms & Light Weapons
DFID	UK Department for International Development	SCG	Serbia & Montenegro
EAR	European Agency for Reconstruction	SDC	Swiss Development Corporation
EBRD	European Bank for Reconstruction and Development	SEE	South east Europe
ECD	Early Childhood Development	SEED	South east Europe Enterprise Development
EIS	Education Information System	SIDA	Swedish International Development Agency
EPI	Expanded Programme on Immunisation	SIF	Social Investment Fund
EU	European Union	SLSP	Survey on the Living Standard of the Population
FAO	UN Food and Agriculture Organisation	SME	Small and Medium Enterprise
FIC	Foreign Investors' Council	SRRHS	Social and Refugee Related Housing Secretariat
FOSI	Fund for an Open Society Institute	TB	Tuberculosis
GDP	Gross Domestic Product	ToR	Terms of Reference
GEF	Global Environment Facility	TTF	Thematic Trust Fund

GIS	Geographic Information System	UK	United Kingdom
HIV/AIDS	Human Immuno-Deficiency Virus/Acute Immune Deficiency Syndrome	UN	United Nations
HR	Human Rights	UNAIDS	Joint UN Programme on HIV/AIDS
ICT	Information Communication Technology	UNCT	UN Country Team
ICTY	International Criminal Tribunal for the former Yugoslavia	UNDAF	UN Development Assistance Framework
IDPs	Internally Displaced Persons	UNDG	UN Development Group
IECD	Integrated Early Childhood Development	UNDP	UN Development Programme
IFC	International Financial Corporation	UNEP	UN Environmental Programme
IFI	International Financial Institution	UNHCR	UN High Commissioner for Refugees
ILO	International Labour Organisation	UNICEF	UN Children's Fund
IMCI	Integrated Management of Childhood Illnesses	UNIDO	UN Industrial Development Organisation
IMF	International Monetary Fund	UNMIK	UN Mission in Kosovo
IMR	Infant Mortality Rate	UNODC	UN Office for Drugs and Crime
IOM	International Organisation for Migration	UNRC	UN Resident Coordinator
IT	Information Technology	UNV	UN Volunteer Programme
LEAP	Local Environmental Action Plan	US	United States of America
LEHAP	Local Environmental Health Action Plan	USAID	United States Agency for International Development
M&E	Monitoring and Evaluation	USI	Universal Salt Iodisation
MCH	Maternal and Child Health	VANE	Violence, Abuse, Neglect & Exploitation
MDCs	Municipal Development Committees	VCCT	Voluntary Confidential Counselling and Testing
MDGs	Millennium Development Goals	WB	World Bank
MDGR	Progress Report on the MDGs	WFP	World Food Programme
MFA	Ministry of Foreign Affairs	WG	Working Group
MICS	Multiple-Indicator Cluster Survey	WHO	World Health Organisation
MoES	Ministry of Education & Sport	WTO	World Tourism Organisation
MoF	Ministry of Finance		
MoH	Ministry of Health		
MoI	Ministry of Interior		