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Ministarstvo zdravlja



This project is funded
by the European Union



**STRATEGY AND ACTION PLAN FOR PUBLIC
ADVOCACY FOR INNOVATIVE CARE
SERVICES FOR THE ELDERLY IN THE
COMMUNITY**

The “I-CCC Project” is co-funded by the European Union and the Austrian Development Agency. This publication reflects only the author’s view and the Commission can not be held responsible for any use, which may be made of the information it contains.

Introduction

Montenegro is facing the challenges of demographic aging, a result of long-term trends in declining birth rates and significant emigration. Over the last two decades, the proportion of young people in the population has been decreasing, while the share of older and middle-aged individuals is increasing, influencing the age structure. The birth rate continues to decline, reducing the proportion of the young population and fertility to 1.8, whereas 2.2 is needed for stable generational replacement. **The average age** of the population has increased from 30.1 in 1991 to 38.8 years, while the EU average is over 43 years. The percentage of those aged 65 and older has risen from 8.3% in 1991 to 12.8% in 2011. The aging index and the total dependency ratio are increasing, indicating an unfavourable age structure. Regional disparities are observed through migrations and the aging of the northern region, while central and coastal regions are experiencing an increase in the elderly population. Projections for 2061 indicate further **population aging** and an increase in the dependency index. **Economic consequences** include a reduced labour force supply, increased costs for supporting the elderly, and a decrease in national savings. A decrease in motivation for technological innovations could have a long-term impact on economic growth. Emphasizing education, changing perceptions of older people, and promoting social inclusion are crucial to mitigate the economic and social consequences of population aging.

With the implementation of the **Law on Social and Child Protection**, social protection for older people was, for the first time, formally recognized as a specific right for defined population groups. There is a significant shift in the focus of competent authorities towards older people, emphasizing **networking** and the establishment of **the community based services**. Civil society organizations play a crucial role in providing community services, and there is a need to formalize and standardize their role through the **licensing process**. Existing laws support the **decentralization** of social welfare services, allowing the civil sector and other entities to provide services in the community. However, there is insufficient awareness of available services at the local level. Improving **collaboration** between **local stakeholders** and involving **local self-government** units in planning and financing community based services are crucial for the further development of the social welfare system. The Ministry of labour and social welfare has established a licensing system for professional workers and service providers in social and child protection to enhance service quality. However, **challenges** include a lack of professional capacity, deficiencies in monitoring and evaluation mechanisms, and insufficient awareness of available services. **The sustainability** of services requires constant and sustainable **funding** sources. Communication between civil society organizations and relevant ministries needs improvement, and the NGO sector should be actively involved in decision-making processes. There is a need to promote existing services and educate the target group about available support services.

Future strategic approaches should encompass **integrated** support services, encourage volunteer work, motivate employers to hire older individuals, improve healthcare, prevent neglect and violence against the older people, enhance the availability of support services in rural areas, improve service standards and **quality**, and coordinate the actions of various stakeholders at the national level.

Needs assessment

The research conducted on the sampled elderly population in Bijelo Polje and Bar in 2021 highlights a wide range of **needs** for this target group. Older citizens often face prejudices, and their significant potential to contribute to the community is frequently overlooked. The concept of **healthy aging**,

emphasized by the **World Health Organization (WHO)**, is positioned as a priority process, enhancing the quality of life for older individuals and encouraging their active involvement in various social segments.

The research results indicate a **high priority** for healthcare needs among the older population, considering their poor self-assessment of health status and the often-present multimorbidity. The respondents generally assessed the **availability** of healthcare services at all levels as good, but the quality of the provided services was not entirely satisfactory. It is essential to emphasize the need for **psychosocial support**. The challenges such as the distance from chosen doctors, lack of public transport and financial limitations often affect the **access to healthcare**.

Regarding leisure time, older individuals often express dissatisfaction with existing opportunities, and a sense of **loneliness** stands out as a significant problem. Education on prevention, treatment, and rehabilitation is not adequately recognized, while the need for **financial support** is marked as highly significant. The research conclusions underscore the need for a **comprehensive approach** to the protection of the elderly, tailored to their diverse needs, with a specific focus on providing support during retirement. Education, information, and the inclusion of the elderly in social activities are crucial for improving their **quality of life**.

In conclusion, older citizens in Montenegro often have specific **needs** that require **tailored services** and support, and the development of a system for the care of the elderly should be **comprehensive, sustainable, and adaptable to meet the diverse needs of this population**.

General objective of the strategy: Local communities in Montenegro empowered to provide innovative multisectoral care services for the elderly through the integration of social and health care, with a focus on sustainability, accessibility, and quality, aiming to improve the lives of the elderly and support those who care for them.

Social and health services for the elderly are often not easily accessible, and it is frequently necessary for the family to allocate significant resources to receive adequate care. In many cases, they are unaware of their right to free services or lack information on where to seek assistance. In the European Union, informal caregivers (family members, neighbors, relatives) provide up to 80% of care, much more than health and social institutions. Caring for a family member often comes at the expense of the caregivers' own needs, as they frequently have to balance family, children, work, society, and the care recipient. On this journey, caregivers often reduce their working hours, leading to more strenuous informal economic activities or complete withdrawal from the labor market. Considering that most caregivers come from economically disadvantaged families, a reduction in income increases the risk of intergenerational poverty, as caregivers themselves often become socioeconomically and healthily vulnerable over time. Given that the majority of caregivers are women, this situation clearly contributes to a gender-based pay gap and pension gap, placing them in an even more challenging position to afford long-term care. On a personal level, due to significant pressure, lack of support, and a constant sense of guilt, these individuals often experience burnout syndrome, exposing them to the risk of depression and the need for psychosocial support.

Strategy and action plan

Specific objectives:

- ✓ To ensure that target groups understand the importance of integrating social and health services and promote a collaborative approach to caring for the elderly.
- ✓ To advocate for transparency of information about available social services at the local level in order to increase awareness among the elderly and their families about accessible resources.
- ✓ To incorporate integrated social and health services into local and national strategies and plans, ensuring resources and comprehensive measures needed for the implementation of innovative community care centers.
- ✓ To advocate for greater initiative by local governments in allocating funds from the state budget for the development of integrated social and health services, particularly directed towards innovative centers.
- ✓ To achieve changes in the existing funding model to support the integration of social and health services in innovative community care centers.

Mapping target audiences:

1. **Decision-makers at the national and local levels:** This group includes representatives of state and municipal authorities and other relevant institutions at the local level. The goal is to ensure support, engagement, and resource allocation for the development and implementation of innovative care centers.
2. **Staff in local health and social care institutions:** The aim is to achieve collaboration and coordination between social and health care, ensuring an understanding of the benefits of integrating these services and fostering joint cooperation.
3. **General public, media, civil society organizations:** The goal is to increase awareness and support for innovative community care centers, enabling elderly to stay in their homes for as long as possible with a high quality of life, and providing much-needed support to their families.

Implementation of the Advocacy Plan

The specific recommendations defined by the project stakeholders through conducted research and evaluation of provided services are outlined in the Advocacy Plan. This plan includes:

1. Specific problem area
2. Message/goal
3. Target audience
4. Communication channel
5. Activity holder - the responsible person/organization tasked with conveying the message and advocating for our proposals.

Depending on the communication channel, messages will be supplemented with additional information. On the other hand, communication channels will change based on the availability of the target audience, including key campaign targets and their openness to our suggestions. The tentative deadline for advocating all proposals directly related to actions necessary for the successful achievement of project results and impact is the end of March 2024.

Communication channels combine direct interaction with target groups, media coverage, online presence, and lobbying activities to achieve set goals. Some of these channels include:

- Conferences, Consultations, Local and National Meetings: These events provide an opportunity for direct communication with representatives of national and local authorities, employees in social and health care institutions, civil society organizations, and other relevant stakeholders. Meetings allow for the exchange of information, identification of challenges, and collaborative planning of activities.
- Online Campaign: A crafted online campaign comprising a series of 5 video contents. Each video focuses on the needs of the elderly and informal caregivers, as well as the role of integrated social and health care services in addressing these needs. These videos will be distributed through television and various online platforms such as YouTube, Facebook, Instagram, and Twitter. The goal is to create a viral effect and spread awareness through social networks and television.
- Landing Page: Development of a dedicated website for the initiative. This page will contain information about integrated services, resources for the elderly and their caregivers, as well as all video materials.
- Social Media: Active presence on social media to regularly share information, success stories, and calls to action. Direct interaction with the community through comments and messages provides an opportunity for direct communication with the target audience.
- Media Collaboration: Collaboration with media, both local and national, to ensure media coverage of the initiative. Interviews, articles, and reports can deepen public understanding and provide a platform for further discussion.
- Newsletter: Regularly sending newsletters to interested parties containing the latest information, successes, planned activities, and calls to action.
- Lobbying: Lobbying activities towards relevant institutions to ensure support and recognition of the importance of integrated social and health care services.

PUBLIC ADVOCACY PLAN

PROBLEM AREA	MESSAGE/GOAL	TARGET AUDIENCE/TARGET	COMMUNICATION CHANNEL	DEADLINE	ACTIVITY HOLDER
Absence of integrated social and health care services in legislation and practice	Amendments to the Law on Social and Child Protection that will prescribe methods and standards in the provision of integrated social and health care services	Minister of Labor and Social Welfare	Meetings Conference Lobbying	Until 31st March 2024	RCM
Absence of a clear distinction between services financed by the state authorities and those under the jurisdiction of municipalities	Amendments to the Law on Social and Child Protection will provide space for municipalities to develop services with greater agility.	Minister of Labor and Social Welfare	Meetings Conference Lobbying	Until 31st March 2024	RCM
Large financial expenditures for health care of the elderly	The state can achieve significant budget savings in the long run by investing in preventive services such as those offered by Community Care Centers	Minister of Finance Minister of Labor and Social Welfare Minister of Health	Meetings Conference Lobbying	Until 31st March 2024	RCM Ministry of health

<p>The most important reason why the elderly decide to go to the Nursing Home is the lack of adequate support for life in the community. The need for this support is greater than the available services</p>	<p>Continue the development of both existing and new services, especially integrated services that provide comprehensive protection to beneficiaries</p>	<p>Minister of Labor and Social Welfare Minister of Health Directorate for the Protection of the Elderly and Adults Directorate for Service Development Centers for social work Health centers NGOs</p>	<p>Meetings Conference Lobbying Researches News letters</p>	<p>Until 31st March 2024</p>	<p>RCM</p>
<p>The elderly, especially those in rural areas, live isolated and lonely, and poor material conditions limit their access to social and health care.</p>	<p>Through the establishment of integrated social and health care services, I-CCC contributes to a better quality of life for older people and informal caregivers.</p>	<p>Directorate for the Protection of the Elderly and Adults Directorate for Service Development Centers for social work Health centers NGOs General public The media</p>	<p>Meetings Conference Lobbying Researches News letters The social networks Guest appearances in the media Online campaign</p>	<p>Until 31st March 2024</p>	<p>RCM</p>
<p>Montenegro is at the top of the world ranking in terms of the number of suicides. Every fourth person who commits suicide is older than 65.</p>	<p>Services such as preventive home visits, healthy aging workshops and counseling provided at Community Care Centers reduce loneliness and</p>	<p>Directorate for the Protection of the Elderly and Adults Directorate for Service Development Centers for social work Health centers</p>	<p>Meetings Conference Lobbying Researches News letters The social networks Guest appearances in the media Online campaign</p>	<p>Until 31st March 2024</p>	<p>RCM</p>

	improve the mental health of users.	NGOs General public The media			
Lack of support for people with dementia	Creation of a register of people with dementia Creation of a support action plan The services provided by Community Care Centers for people with dementia have proven to be useful and necessary	Directorate for the Protection of the Elderly and Adults Directorate for Service Development Centers for social work Health centers NGOs General public The media	Meetings Conference Lobbying Researches News letters The social networks Guest appearances in the media Online campaign	Until 31st March 2024	RCM
Lack of support for informal caregivers, especially those who care for people with dementia	Introduction of respite service	Ministry of Finance Directorate for Service Development Ministry of Labor and Social Welfare NGOs General public The media	Meetings Conference Lobbying Researches News letters The social networks Guest appearances in the media Online campaign Case studies	Until 31st March 2024	RCM
Insufficient information of the elderly and informal caregivers about rights and available services	Creation of leaflet about available services Informing the public	Beneficiaries Centers for social work Health centers NGOs General public The media	News letters The social networks Guest appearances in the media Online campaign Case studies	Until 31st March 2024	RCM
Lack of information about available	Creation of a multidisciplinary	Centers for social work	Meetings Conference	Until 31st March 2024	RCM

services, slowness in solving individual cases, overlapping of services	team at the local level that will monitor the development and provision of services	Health centers NGOs Other interested parties	Lobbying Research News letters The social networks Case studies		
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