

Policy Priorities for Social Inclusion in Macedonia

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November 2007

**FRIEDRICH
EBERT** 
STIFTUNG

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This policy paper is a result of the regional initiative of the Friedrich Ebert Foundation to engage in and promote a visible social inclusion strategy in South Eastern Europe. The main pillars, upon which this strategy for sustained social inclusion in the SEE region is based, are: education, health care, employment and social services. Hence, the national policy paper adopts these four pillars as main mechanism for promoting greater social inclusion, and suggests essential priorities in respected domains, which should serve as guidelines for creating a more inclusive welfare state in Macedonia.

Social inclusion policy in Macedonia does not have a long tradition, although persistence of ‘old’ social problems, such as poverty, low living standard and marginalization has been a reason for creation of first social protection programs in the country. Currently, the Ministry of Labour and Social Policy, within the framework of its programme for tackling the problems of the socially excluded (2004) focuses only on four target groups: (1) drug users and members of their families; 2) street children and their parents; (3) victims of family violence and 4) homeless people. We believe that this focus should be widened to include other vulnerable categories. However,

in a country where there is a high and persistent unemployment trend, low level of average salaries as well as non-regular payment of wages and salaries, it is difficult to assess the extent of the socially excluded population, especially because in many ways they might represent a majority group in the overall population.

Therefore, in this policy paper we try to focus on priorities in the field of education, health, employment and social services, which have two-dimensional focus: one of the dimensions of these priorities argue and advocate more universal access to services in these domains thus benefiting the overall population, while the other is connected to priorities that will privilege and improve the access to those that are more vulnerable and need additional incentives to engage in and take up existing educational, health, labour as well as social benefits and services.

As social inclusion is a multi-faceted phenomenon, it should also accompany other aspects and domains. Thus, the elaborated list of priorities is not exclusive of other options, which should be further elaborated as to integrate individuals into better participation at all levels of society.

Education

Education as a fundamental human right and a key instrument of social and economic development and national prosperity represents crucial element of any social inclusion strategy. The general aim of the socially inclusive education is to enable all children, young people and adults, regardless of their ethnic and religious affiliation, sex, social and economic status, place of residence and abilities to have:

- Equal access to education
- Equal possibilities for education with certain quality standards.

In the Republic of Macedonia there is a wide acceptance of these universal goals on all levels, and importance of their realization is emphasized in the strategic documents for the development of education in the country.¹ However, their

implementation is facing many challenges especially regarding children and young people who live in economically underdeveloped areas, in socially vulnerable families and belong to certain ethnic groups (Roma, in particular). One of the main indicators of their educational exclusion is a low level of school attainment, which can be attributed to various reasons: serious shortage of educational facilities, bad conditions for studying, costs for public education, culture and tradition that favour informal and home based education. In the forthcoming period Republic of Macedonia should make efforts to overcome gradually these difficulties and to improve the access and quality of educational services for those who are vulnerable, thus tending to achieve the universal goals of education. We propose the following priorities upon which the educational inclusion policy in Macedonia should be built:

IMPROVING THE PHYSICAL ACCESS TO EDUCATIONAL INSTITUTIONS

In the Republic of Macedonia there is a lack of facilities at all levels of education. Hence, the problem of their accessibility appears, especially at the preschool level, and at the transfer from lower primary to upper primary and from primary to secondary education. In rural/mountain areas

where schools are not located in every village and children live far away from the schools they should attend, the local education authorities should arrange local transportation with a financial help from the part of the state.

¹ National Programme for the Development of Education in the Republic of Macedonia 2005-2015, 2006.

INCREASING CHILDREN INTAKE IN PRESCHOOL EDUCATION

In the total intake percentage of children (18,67%, State Statistical Office, 2002) enrolled in pre-school education in the Republic of Macedonia, those from disadvantaged groups (from poor areas and families, minority groups, mentally and physically handicapped children) are least included in the preschool education and least challenged and prepared for inclusion in the compulsory school system. Therefore, the national social inclusion policy should focus on:

- Enlarging the network of preschool institutions, especially in the rural areas, which should be financially supported by the state and by the local authorities.
- Raising the awareness of parents and families about the importance and benefits of preschool education as an instrument for neutralizing cultural disadvantages and providing equal start in elementary education.
- Improving attractiveness and efficiency of preschool education, by offering different programmes (based on local and children's needs) and organizational forms (institutional, extra-institutional and alternative forms of children inclusion). This variety of activities demands more active participation from the part of the local leaders, business community and NGO sector.

ENSURING COMPULSORY EDUCATION ATTAINMENT

According to the latest amendments of the Laws on Primary and Secondary Education², compulsory education is extended and includes primary and secondary education. The present situation of student enrolment (gross intake in primary education -97.11%, gross intake in secondary education -69.5%) and annual student decrease (PE:1.42%, SE: 2.84%³) shows that the most students leaving compulsory education are from the Roma ethnic group and from the poor families in rural and mountains regions. Bringing the children in the schools should be done by:

- Continuous local endeavours in educating parents and families and strengthening the sense of individual educational needs through different forms of formal and informal meetings and gatherings. This pertains particularly to small communities influenced by prejudice and traditionalism, especially regarding the education of the female child.
- Offering more financial benefits to the poor (free meals, books and working materials, free or low-priced transportation, subsidies

² Official Gazette No.51/2007, No.49/2007

³ State Statistical Office, 2002/04

for student accommodation for those living in dormitories outside the place of residence).

- Ensuring central control of the realization

of parents' legal responsibility to enrol their children in schools.

ENSURING QUALITY OF EDUCATIONAL SERVICES

This priority is a sophisticated instrument for increasing student enrolment at all levels of education and its realization is a two-dimensional task:

- Improving infrastructure capacities and conditions for school life especially in the rural areas (school buildings with quality standards, sufficient equipment, books and teaching materials, sufficient and suitable teaching staff), which could be done with more rational use of allocated financial resources.
- Enhancing teaching quality, which requires: Strengthening teacher's role and status (careful selection of candidates, high-standard initial teacher education, centralized control of teachers' accreditation, systematic professional development, competitive salaries and other professional incentives, benefits for those accepting to work in less developed or underdeveloped regions)

- Centralized curricula (at all levels, except university) and high-standard textbooks and teaching materials
- Teaching methodology that promotes higher order thinking abilities and stimulates initiative and independent and cooperative life-long learning.

Ensuring quality standards in pre-school, elementary and secondary education should be government responsibility. The state should develop and implement a system of quality assurance and control based on standards that refer to every issue stated above. The higher education institutions, which operate in more competitive conditions, tend to follow the market mechanisms in ensuring high standards, with accompanying state intervention in case of bad performance.

PROVIDING FINANCIAL SUPPORT FOR THE POOR

Educational system in the Republic of Macedonia is a predominantly public one. The primary and public secondary education are free, even though the school attainment on these two levels includes many expenses (meals, books, working materials, clothes), which are not always easy to cover for many students' families. On the other hand, preschool and higher education offer fee-based education that is not affordable for socially

disadvantaged families. Having in mind financial and organizational incapacity of the Macedonian state to provide free access to education on all levels for everyone, financial assistance for the vulnerable categories of children/students can be provided as:

- State support - exempt the poor from the obligation to pay fees, scholarships for talented students

- Local community and school support-transfer of different grades textbooks at the end of a school year, subsidies referring school meals and accommodation in dormitories.
- Creating a socially inclusive education in the Republic of Macedonia is a long-term and expensive process, which demands a strong political will and commitment to education as a

high priority, and consequently, more investment and more effective and fair allocation of the available resources. Anyway, the fact that socially inclusive education is not easy to achieve should not be a reason for denying of anyone's right to education and for depriving anyone of equal quality of educational services.

Health Care

Republic of Macedonia is going through a long unstable and painful process of reforming the provision and financing of health services. The health insurance coverage is reportedly close to 100 percent, the indicators of physical access are impressive, and the basic benefit package is quite broad covering practically all health services. This generosity of publicly financed system is not affordable and creates significant inefficiencies, ridden by corruption and balanced by expenditure cuts that are affecting the primary health care system, and the maintenance of facilities which are important for the poor. The quality of health care has also deteriorated due to bad facilities mostly outdated equipment, lack of materials with wages and salaries absorbing most of the health budget.

There is evidence from various beneficiary assessments that the availability and the quality of health care are inadequate for certain number people who cannot be insured under any basis (around 35.000) and those who cannot afford to pay for drugs, pay out of pocket or are unable to afford private doctors' fees. Some of the more

vulnerable groups in terms of their access and benefits from the health care system include: a) Long term care patients: the situation is still very bad especially in the mental health facilities where among others there is a problem of proper responsibility coordination between the health and social policy sector; b) Elderly: In 2005 the percentage of the population over 65 years of age increased to 11.1%. The majority of the elderly people do not have sufficient funds for a proper health care they need. There are cases also where the family is not able to provide such care, especially in certain periods of the year. Care is then provided in specialized hospitals providing beds for prolonged stays to elderly patients. So far there are only a small number of homes for the retired people; c) Roma population: Insufficient and poor infrastructure in settlements where Roma population lives – educational, social and health facilities, influences the socio-economic and health status of the Roma people; d) Population from rural areas: Rural units very often offer poor facilities, lacking basic equipment. This may be one of the reasons why patients, especially in rural areas,

aim to bypass primary care. e) Uninsured and redundant workers whose companies are not paying any contribution

Having all this in mind, we suggest the following interventions to be implemented that can tackle the problem of social exclusion and health care.

To begin with, we suggest that the general model which could deal with this problem and meet the principles of solidarity, equity and proper

efficiency in the health system in Republic of Macedonia could be:

Policy controlled private delivery in the Primary Health Care with the exception of some preventive and emergency services, rationalized and well managed public hospitals accessible to all citizens, enhanced role of the public health services and interventions, accessible benefit package, income-related insurance fees, socially determined co-payment policy.

POLICY CONTROLLED PRIMARY HEALTH CARE

Emphasis on the enhancement of the Primary Health Care Services as still most cheapest – affordable level of services to comprehensive diseases management level- as gate keeper, will bring the adequate health care services close to the groups at risk.

The rationalization of health care facilities and proper geographical redistribution because of limited resources still has to be much more efficient and thereby to significantly improve the infrastructure of facilities as well as the quality especially of primary care services as most accessible for all groups of citizens. The introduction of more productive methods of provider payments (capitation-based system at primary care level and annual global budget allocation and DRGs⁴ for inpatient care based upon performance indicators) – should be further improved. As challengeable to be properly

implemented those changes could from other side jeopardise but also improve the access to the services for some specific groups. A possible solution to avoid this are targets set out in the new payment models where special incentives are introduced for the work in the country side, preventive and promotion activities as well as rational prescription of drugs and referrals for upper level. Further more the combined model of payment through capitation and fee for services could create more incentives for improved efficiency on this level which is very much important especially for the vulnerable groups.

Some services, such as emergency medical and dental care, emergency home treatment, preventive check-ups of pre-school and school children as well as some patronage services should remain in the public domain, especially since those services are much more often used by the groups at risk.

⁴ Grupeve të ngjashme diagnostike

WELL MANAGED PUBLIC HOSPITALS ACCESSIBLE TO ALL CITIZENS

In a strict social insurance system as Macedonian health care system is, the decision is more likely to be the accent on the rationalization of the hospitals, and proper modernization of the selected ones in the process of medical mapping including the more realistic and productive DRGs payment models and adequate information system which is missing so far. An integrated approach to service delivery with close cooperation between primary-, secondary and tertiary-level services is also missing (proper disease management).

Rational prescription of drugs but also an adequate access to the essential drugs (especially those from the positive list) is among crucial conditions that can impact the proper access especially by the socially excluded. The newly privatized system of the pharmacies started to present the risk of jeopardizing the access to essential drugs especially for the vulnerable groups, since some of the owners started to apply a crude market rather than social approach.

The current system also creates some shortages for the long term health care services and homes for elderly. Taking into account the size of the demand, there should be public private partnerships in the investment of such facilities and services, as well as proper conversion of the surplus of the beds in the hospitals to this specific long term services.

These processes should be accelerated. The state should increase the empowerment of community groups; create opportunities for citizens to express their needs; deliver services that promote social inclusion of vulnerable groups, health care reforms aiming at improving the capacity and efficiency of the primary health care level, and reducing the costs of treatment in hospitals. From the other side, local communities should have more interest in possibilities to invest (jointly with the central government) in health care facilities especially on the primary level for the benefit of citizens.

ENHANCING THE ROLE OF THE PUBLIC HEALTH SERVICES AND INTERVENTIONS

Improved health promotion and other public health interventions and programs in the country supported by the central and local community's budgets as well by some international agencies could definitely improve the access to proper

health care services to the populations at risk and especially in regard to the specific diseases prevention linked to the low economic status or insufficient access to health care services.

REFORMS IN THE HEALTH INSURANCE POLICY–ACCESSIBLE BENEFIT PACKAGE AND INCOME RELATED INSURANCE AND SOCIALLY DETERMINED CO-PAYMENT POLICY

The current benefit package is considered very comprehensive and very costly. Aiming to keep the emphasis on public services and universal access, beside the parallel introduction of privatization, the current revision process should design an accessible but also affordable (for the HIF⁵) type of package(s): an essential package of services should be accessible for all citizens (life threatening cases or emergencies but also including preventive check-ups, immunization, coverage of part of the positive list of drugs and treatment of a range of communicable diseases). It seems that there are no sufficient funds for a broader list of services which the public expects to be in the package.

The process of changes and rationalizations in the co-payment policy which contributes to the financial sustainability of the basic benefits package should be realized without endangering the accessibility to benefits by the vulnerable population groups. It seems that imposing a flat co-payment per services and prescription and including a safety-net for the poor; or a lower co-payment rate for the poor, could be a proper solution for this type of exclusion. In that case it will be no longer reliant on the changing pricing

of the positive list of drug; the co-payment is fairer as it does not discriminate against people who need more expensive drug therapies.

As concrete examples of possible improvement in the co-payment policy which can be supported: Children between 1 and 5, and families whose income is less than 60% of the average wage be exempted from co-payments; and that children between the ages of 6 and 18 are exempted from co-payments for selected services. Care should be taken when evaluating the family's social status related to their income - as, it would appear that there is currently insufficient evidence in the system about family earnings, particularly for the self employed and contractors

The forthcoming Conditional Cash Transfer Program to be introduced by the Government assisted by the World Bank can considerably improve the proper use of health care services especially among the vulnerable groups (subsidizing regular preventive checkups of the children and cancer screening programs among women). But this should be introduced only as a complimentary programme to the already existing social assistance scheme.

⁵ HIF – Health Insurance Fund

Employment

In a country where there is a persistently high unemployment rate (36.3%⁶), the urgency to make employment policy more responsive and effective is of paramount importance. When considering employment priorities one also has to take into account other unfavourable labour market indicators, such as: significant level of undeclared work, which according to some calculations represents an estimated 33–37% of GDP (ETF, 2006); low skilled labour force as approximately two out of every five persons have low qualifications (ISCED 0–2);

higher unemployment rates among vulnerable ethnic groups, such as Roma - 78.5%⁷, lower participation rates among women, especially those from less represented ethnic communities such as Turks and Albanians etc. Although the improvement of these unfavourable labour indicators are dependent from a more coherent macro-economic policy as well as more sharp economic growth, still we concentrate here on employment priorities that are more dependent on institutional, administrative and legislative management of employment policies.

INCREASING THE FORMAL JOB MARKET

Although the grey market in Macedonia is not officially estimated, still it's evident that it is of considerable size. Dealing with the problem of the grey market directly impacts the living conditions of mainly the most vulnerable categories, such as those without sufficient education, elderly, those on low wages, as well as weak ethnic groups. In absence of more vigorous economic growth, it is easy to understand why all governments in Macedonia have silently accepted the existence of the grey market, thus preventing greater social unrests. However, this policy only proved to be a catalyst for greater social tensions and increased inequalities and uncertainties among most vulnerable groups. If the formalization of the grey market can be done as a consensus between all political parties, including participation of all stakeholders in the labour market but also indicating that it is a high, but long-term priority of the country, than this strategy can

contribute towards more benefits than costs for both the state as well as the individual. Increased capacity of the state (or municipalities) to tax can increase the public budget, and hence create more opportunities either for new public jobs or for support of those out of the market through the social protection scheme. The individuals will also have increased security not only in the present condition, but also in terms of their future incomes, such as pensions, unemployment insurance etc.

However, an effective strategy towards formalization of the grey market should not forget three important elements: (i) undertaking previous comprehensive study about precise systematization of categories of jobs offered on the grey market; characteristics of the 'formally

⁶ In 2006, according to LFS, among 15-64 year olds.

⁷ Data from the Census in 2002.

unemployed' according to: their position in the labour market, educational attainment levels, ethnicity, place of residence etc. (ii) implementing an incremental approach in registering of 'grey' businesses and jobs into the formal market, involving phases necessary for the 'new' labour market entrant to cope with the financial burdens i.e. the real costs of the formal market. This can involve: phased payments, loans at 'state-fixed' rates, subsidized grants, etc. (iii) regular 'formal' business that already exist, should not be left disadvantaged and 'stigmatized' because they are 'regular payers', and without any compensation. In order to compliment their regular tax-payments, cost-benefit actions should be undertaken that can 'reward' them in a way that will only be complementary to the overall strategy for job market formalization.

Another important aspect of increasing the formal job market includes the decentralization process, especially in local municipalities where

less represented ethnic communities are majority (i.e. Roma in Shuto Orizari, Albanians in local municipalities in Western Macedonia). Namely, according to statistical information's (2002 Census), the highest unemployment rates are evident among Roma with 78.5%, followed by Albanians with 61.2%. On the other hand, the participation of ethnic communities, as well as of low skilled workers in the informal economy is quite high, which can be speculated that results from limited employment opportunities in public administration in the past, as well the lack of trust among these communities in the public (employment and welfare) system. Therefore, if the legalization of businesses on local level is premised on increased budget of the local municipalities (stipulated by the law), than it might be expected that representatives of these ethnic communities might feel more attached to the success of this strategy as they might benefit more from the local budget programs.

UNIVERSAL ACCESS TO SERVICES OFFERED BY THE EMPLOYMENT AGENCY

Although the Agency for Employment (EA), as well as the Centres for employment on the municipal level, grant access to benefits and services for unemployed on equal grounds, still there seems to be some institutional blockages which prevent some of the most vulnerable groups to take up these services.

For example, some of the problems associated with access to unemployment benefits arise from the need to prove ownership of land, required

by the EA to determine whether potential unemployed benefit recipients have arable land which can be used for economic purposes. This is required from those that are registered without any educational certificate. Since many of the unemployed (mainly Roma and Albanian) do not have settled property rights, they cannot fulfil this criterion and are prevented from fully realising their social rights. Also, certain professions, such as farmers are not included in the unemployment insurance and thus can not benefit from it.

Finally, the redundant workers are not given access to unemployment benefit until the process of enterprise liquidation is finished. However, the Agency should assess whether the workers have paid contributions in the past and on that basis allow them the eligibility to unemployment rights.

Also, the current offer of training and re-training courses through the Agency for Employment is focused only on those registered unemployed that have basic educational qualification (at least primary school). However, according to the Annual Report of the Employment Agency (2006), there are 51.3% unemployed (of all registered) without any qualification (only a few percent are semi-qualified). Also, the exact number of unemployed persons that have not even completed primary school is not clear. This is important to know, as they seem to be excluded from any ESA services.

It seems important that the Agency for Employment tries to locate all these problematic areas that prevent access to unemployment services and that reduce the effectiveness and take up of the offered training courses. Criteria for registering unemployed as well as criteria for receiving unemployment services (not monetary benefits) should not be connected so much on rights but rather on needs of the unemployed persons. Inclusion of particular categories into the unemployment insurance scheme, such as farmers should also be taken into consideration. There should be a clear desegregation between the unemployment services and other rights from the social security system (i.e. the 'blue coupons' for health insurance currently issued by the Agency for all registered unemployed). This desegregation should lead towards greater focus on priority needs of the unemployed as well as to make unemployment register a relevant date base, and not a fictional list of people who do not really look for employment.

SYSTEMATIC ASSESSMENT OF THE LABOR MARKET NEEDS FOR SKILLS AND PROFESSIONS

There is a lack of analysis regarding skills needed on the labour market. The labour market demand and information's on needed occupations are not part of the overall employment policy. The Government should support the opening of an independent institution for labour market analysis which can give current assessments and

also offer forecasts for the needed professions and skills. This should also contribute towards re-orientation of the educational curricula and programs at secondary, vocational and tertiary education in Macedonia, as currently they too do not offer courses which are based on the current market needs.

EFFECTIVE INCLUSION OF SOCIAL PARTNERS INTO THE EMPLOYMENT POLICY CREATION

Notwithstanding the problems of trade unions and their re-organization (into smaller, sectoral and/or independent units of organizations), still they should become more visible in the process of social policy making. Currently, there is a lack of cooperation and more importantly acknowledgment of many trade union initiatives, which contributes towards creation of isolated social policies that lack the support from its main beneficiaries. The Socio-economic Council, which functions as tri-partite body involving representatives of the Government, trade unions and the employers association, should be made more functional and should be consulted in relation to all social policy initiatives and reforms. This Council should have a more visible and precise

agenda, with more regular meetings, while their resolutions and proposals should be elaborated more publicly either in front of the parliament or other parliamentary commission (sub-group).

Having in mind the increased influence of the non-governmental sector in provision of social services, a similar body should be created with representatives of the NGO sector (working on different social policy domains, as well as from different geographical locations) and the governmental institutions (those from the Ministry, but also from the Centres of Social Work (CSW), Employment Agency, Health Protection Institute).

IMPROVE COORDINATION BETWEEN INSTITUTIONS ADMINISTERING EMPLOYMENT POLICY

Ineffective coordination among agencies and organizations working in the social welfare field must be strengthened in order to improve not only the holistic approach in policy creation, but also to avoid duplications and introduction of unnecessary criteria for social welfare beneficiaries. Coordination between the EA (centres for employment), CSW, revenue offices

and cadastre (land registry) offices must be realized on systematic level as to assure and improve the problems of requiring unnecessary (or duplicate) documents, and improve the efficiency of delivering their services. Such coordination would be beneficial for the clients as well; as such cooperation would reduce the time and the costs in obtaining the needed service.

Social services and benefits

The system of social protection in Macedonia offers services and benefits to individuals, families and groups of citizens when they are affected with particular social risk or social problems. Hence, the main group of beneficiaries of the social protection system include: elderly, unemployed people and people on low incomes, disabled people, children without parents and parental care, children victims of violence, children with asocial behaviour, persons in conflict with law, persons victims of family violence, substance abusers, dysfunctional families as well as divorced families with children. Although the

legislative scope of eligible beneficiaries implies a rather universal access to services, still the recent trend and increased focus on means-testing and conditionality restricts and makes the access to benefits pre-conditioned on variety of criteria. We believe that social services and benefits should not only serve as a safety net and be applauded only for its efficiency and good targeting, but also provide basic support which will improve the inclusion of vulnerable groups. In that respect, we propose few priorities which may improve the current functioning and supply of social service and benefits.

INCREASED EMPHASIS ON NEEDS-BASED ASSESMENT

Contrary to the current trend of rights-based and means-testing approach, the social welfare system should also enable access to services and benefits according to the applicant needs. The focus on needs might provide greater outreach to categories that do possess certain capacities or means/resources, but lack access to services and benefits because of other reasons, such as: cultural factors, stigmatization, language barriers, and distant location. The needs-based assessment should especially be emphasized in situations

when negative trends such as high unemployment, irregular payment of salaries, insolvency of social insurance funds as well as enterprise insolvency have a long-term character. In this way, social services and benefits will provide greater access and can serve as a support mechanism for greater social inclusion for the vulnerable social groups, as well as greater social cohesion among those living in regions with different socio-economic development.

ASSESS AND EVALUATE THE IMPACT OF CONDITIONAL TRANSFERS BEFORE ITS IMPLEMENTATION

The tendency towards introduction of more rigid criteria regarding access to social services and benefits should be based on ex-ante systematic assessment. The implementation of conditional transfers should not only be determined on short-term economic goals, but also involve analysis on potential contra-effects both for the social protection system as well as for the individuals in the long-term. Conditioning social assistance

on take up of work or conditioning the social benefits on beneficiary's behaviour (i.e. regular health check ups, regular education attainment), might prove contra effective, as more people might loose the only means of resource and at the end again need some other (probably more expensive) protection/security transfer from the state.

DECENTRALISE SOCIAL SERVICES

Locally provided and financed social services have more meaning and more effect on the local community and local municipality itself. The Government should reduce its influence (provision and maintenance) on social service provision in municipalities, where there is an existence of resources and capacities for individual functioning of such services. Current activities focused on opening public kitchens

by the Ministry of Labour and Social Policy might hinder other vital resources and actors in the local municipalities which can sponsor and sustain these local services. Therefore, it is of vital importance that the Government proceeds with the decentralization of social services without interfering and duplicating social service provision.

INCREASE AND IMPROVE CAPACITIES FOR DELIVERING SOCIAL SERVICES

Centres of Social Work as local providers of social services should be equipped with more personal, especially in local municipalities where the number of beneficiaries is higher. It is also very important that every local municipality should employ social workers according to the size, but also other characteristics (linguistic, cultural etc.) of its population. Centres of Social Work should be adequately equipped to deal with both administration of social transfers and social

service provision. Also, additional imperative should focus on training of the social service personnel, which can enable them continuing contact and familiarization with new methods and techniques of work. Finally, advancement into higher professional ranks according to the level of educational qualifications should also be recognized and implemented, which can serve as a better incentive for the social service staff to engage in training courses.

INTRODUCE STANDARDS FOR LICENSING AND ACREDITATION

A well developed and organized system of licensing and accreditation should be introduced, to serve as a guarantee for greater quality and increased competencies among social service providers. This would be beneficial not only for the public social services, but also for other non-governmental and private initiatives in the field of social welfare. This system should provide practice guidelines, which will prevent

improvisations and ad hoc decisions in social service delivery. Its creation should be undertaken and administered by educational institutions in the social welfare field as well as associations of social workers, thus guaranteeing the impact of both the science and practice in creation of quality standards and mechanisms.

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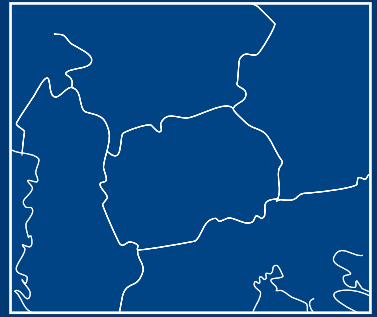
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