

MDG 1 Eradicate extreme poverty and hunger

- 1) **Hunger**
- 2) **Who are those in the country most likely to face food insecurity and why?**
- 3) **Please describe specific social assistance policies and programmes that ensure those most vulnerable have access to food**
- 4) **What processes and mechanisms designed to ensure participation of civil society in decision making as well as transparency and accountability have been most useful in improving access to adequate food for the most vulnerable, and which have been less useful.**

2)

According to the 2008 Survey on Income and Living Conditions (SILC), the at-risk-of-poverty rate in Slovenia was 12.3%. This means that in 2008 12.3% of people in Slovenia were living below the at-risk-of-poverty threshold (Source: Statistical Office of the Republic of Slovenia).

The at-risk-of-poverty rate data by different socio-economic groups of persons and households show that households without working members were in the worst position (poverty rate 39.1%), especially the ones with dependent children (poverty rate 57.0%), followed by one-member households (poverty rate 41.9%), one-parent households (28.8%) and older couples without dependent children (15.3%). Among most vulnerable to poverty were also the inactive persons (20.2%); among them the unemployed persons stood out with a 37.6% rate. Older women (27.6%) and tenants (25.2%) also had high poverty rates.

As expected, the lowest at-risk-of-poverty rate was registered in work intensive households in which all adult members were employed or self-employed (3.6%) and for persons at work (5.1%).

Social transfers lower the at-risk-of-poverty rate

If social transfers - family and social benefits - were not considered as income, the at-risk-of-poverty rate would almost double and amount to 23.0%; in the case of older persons it would amount to 32.9%. If also pensions were subtracted from income, the at-risk-of-poverty rate would increase to as much as 38.6%. It would increase for all age groups, the most for people over the age of 64 for whom it would rise to 85.3%. These data show that in Slovenia social transfers still have important impact on decreasing the at-risk-of-poverty rate.

Low income inequality

The Gini coefficient shows how income is distributed among the population. In 2008 the value of the Gini coefficient was 23.4% (a year before 23.2%), which shows a rather equal income distribution. The S80/S20 quintile share ratio, which also shows income distribution among the population, was in 2008 3.4. This means that 20% of the wealthiest people in Slovenia had 3.4-times more income than 20% of the poorest people in Slovenia.

Basic income and poverty indicators, Slovenia, 2008 - provisional data

	Income in cash ¹⁾	Income in cash + in kind
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At-risk-of-poverty threshold ²⁾ (EUR)	6,535	6,678
At-risk-of-poverty threshold for a household consisting of two adults and two children ³⁾ (EUR)	13,724	14,023
At-risk-of-poverty rate (%)	12.3	11.9
At-risk-of-poverty rate before social transfers excluding pensions (%)	23.0	22.2
At-risk-of-poverty rate before social transfers including pensions (%)	38.6	37.8
Inequality of income distribution: S80/S20 quintile share ratio	3.4	3.3
Inequality of income distribution: Gini coefficient (%)	23.4	22.9

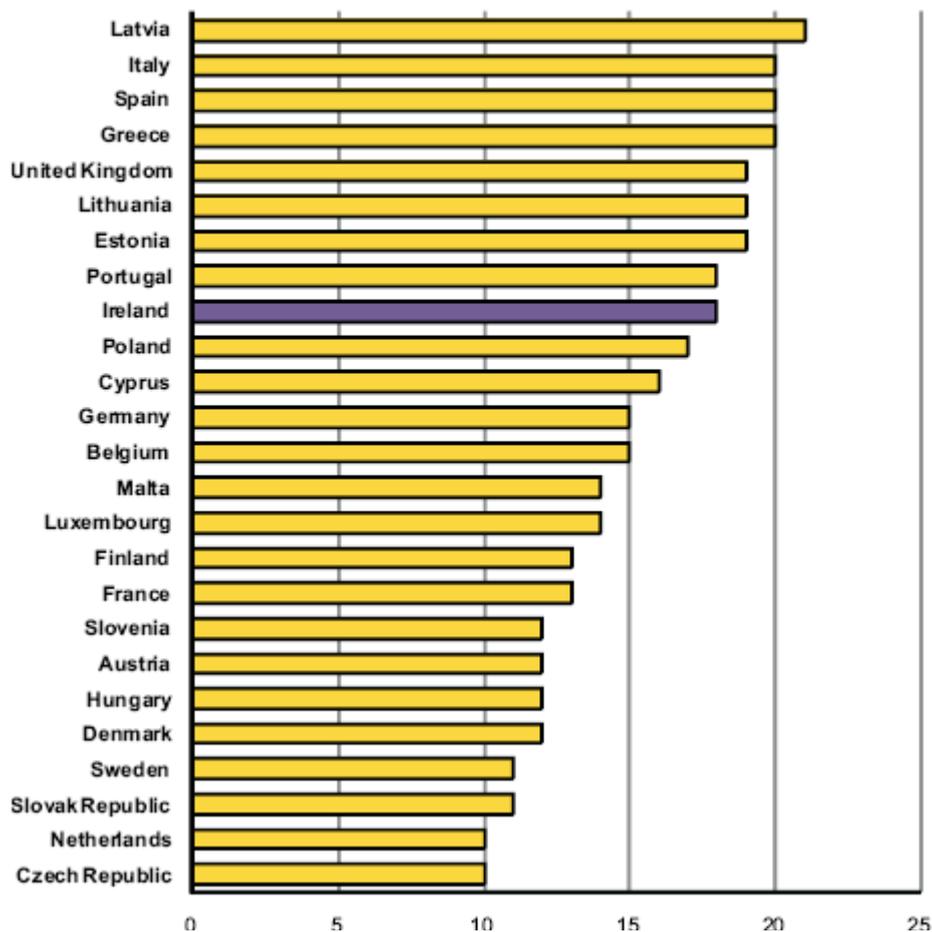
1) Part of income in kind is included: the use of company cars for personal purposes.

2) Annual threshold for a one-member household.

3) Annual threshold. Children are under 14 years of age.

Source: Statistical Office of the Republic of Slovenia

Figure 5a The at risk of poverty rate (EU definition of income and modified OECD scale) by country, SILC 2007



Source: [http:// www.cso.ie/releases_publications_documents/silc/Current/silc.pfd](http://www.cso.ie/releases_publications_documents/silc/Current/silc.pfd).

3)

Normative regulations that directly regulate the situation of socially disadvantaged persons in the Republic of Slovenia are mainly the **Social Assistance Act**, which also regulates, as a framework law, the conditions for the implementation of an individual's rights and obligations to receive social assistance benefits and services, the Act regulating the Adjustments of Transfers to Individuals and

Households, and the Parental Protection and Family Benefits Act. The documents, which include measures for increasing the social inclusion of the most disadvantaged social groups, are also of major importance, in particular the Resolution on the National Social Assistance Programme until 2010 and the National Report on the Strategies for Social Protection and Social Inclusion for the period of 2008-2010.

The State ensures individuals and families, who do not have a sufficient means of subsistence or have means that are lower than the minimum income defined in the Social Assistance Act, means for meeting minimum needs of an amount that guarantees their subsistence in the form of financial social assistance, which is provided for all those persons, who do not have their own incomes or receive them in an amount that is below the above stated amount. In exceptional circumstances, when an individual or a family is materially disadvantaged, emergency financial social assistance can also be granted.

In the period of economic crisis we adopted the Special Allowance for Socially Disadvantaged Persons Act, which is intended for the most vulnerable groups of population or groups with the lowest income. According to this Act, at the end of August approximately 120 thousand beneficiaries received a special one-time financial bonus.

Families with low incomes are entitled to receive a child benefit, which is determined on the grounds of a monthly income per family member, as a percentage of the average monthly wage in the Republic of Slovenia.

Parents in families with low incomes are entitled to a reduced payment for kindergarten, which ensures access to child care. If parents or families receive financial social assistance, their payment for kindergarten is fully subsidised. Secondary-school and university students from families with low incomes are entitled to receive State scholarships.

There is also a form of extraordinary financial social assistance (*izredna denarna socialna pomoč*), which may be granted in exceptional circumstances. It may also be given in cases where the beneficiary exceeds the ceiling for the allocation of this type of assistance, but for reasons beyond their control. In their application, the applicant must specify the purpose for which assistance is needed and the level of resources required. The beneficiary is obliged to spend the aid it receives for the purpose for which it was granted.

Compulsory health insurance for persons entitled to financial social assistance is covered by the State budget, which enables access to health care services.

However, beside financial transfers to individuals and families with low incomes or with no incomes, the inclusion of individuals, capable of working, in employment is of extreme importance in terms of poverty alleviation. Employment activation comprises of activities from preparing an employment plan to participating in employment and active job seeking programmes offered.

4)

NGO's are mostly included in the preparation of state strategies and legislation. Considering the social inclusion of persons and families with low incomes, a major role is played by the programmes of social inclusion for vulnerable groups (e.g. the Roma people, early school-leavers, persons with mental disorders, disabled persons, treated addicts), which are mainly implemented by non-governmental organisations and financed by the Ministry of Labour, Family and Social Affairs via public tenders.

2. Decent work

- 1) Who are those most likely to be working poor or those who are engaged in vulnerable work?**
- 2) Please describe specific policies and programmes that are designed to benefit the most vulnerable?**
- 3) What process and mechanisms designed to ensure participation of civil society in decision making as well as transparency and accountability have been most useful improving decent work for the most vulnerable, and which have been less useful.**

1)

Working poor in Slovenia is a category that is usually harmed by the external economic reasons as restructuring. The situation further deteriorated during the crisis. Companies which are not competitive enough, try to survive but the costs for the employees are high. Working poor are usually low skilled persons, working in manufacturing. To avoid further decrease in quality of life, Slovenia increased the minimum wage in 2009. There are no specific categories of working poor, more depending on specific sectors, which were not productive and competitive enough. However, in terms of poverty, Slovenia rates better than average EU.

2)

The Ministry of Labour, Family and Social Affairs (Molfsa) prepared a new ALM programs, dedicated to difficult-to-employ persons (around 16 mio € for next three years). The program provides training for a specific working place, including subsidized employment in the later phase. The participants will be persons, unemployed at least 12 months (in last 16 months); the priority will be given to women and long-term unemployed persons. The project will be carried out by non-profit sector.

Redesigned Public works serves as an instrument to promote the development of public services: Educations, social security, care for the elderly, home help, childcare, environmental work. The number of participants and funding in 2010 will be double that of this year, EUR 45 million being earmarked for the programme .

Social security system reform, which will start in 2011, should ensure the observance of the "make work pay" principle, while at the same providing for an efficient and transparent system: a single entry point, a new cost of living assessment as the basis for determining the appropriateness of social transfers and the minimum wage, etc.

Due to the crisis and its consequences, one-off solidarity assistance for the most disadvantaged in September 2009 was deducted to cca 100.000 persons. The measure aims at improving the economic position of individuals and families earning less than 60% or 70% of the minimum wage.

Slovenia will further follow the 'make work pay' principle to increase employment opportunities, reduce dependence on social transfers and at the same time, increase work activity. Various non-financial and financial factors will have to be taken into account, as well as the tax and benefit payments systems.

3)

On 29 October 2008, the Union of Free Trade Unions of Slovenia (Zveza svobodnih sindikatov Slovenije, [ZSSS](#)) announced at a press conference that it would be proposing that the minimum net wage should be raised to at least €500 a month, so that workers receiving the minimum wage are guaranteed a decent standard of living for themselves and their families. Subsequently, the government in 2010 approved the Minimum Wage Act and submitted it to parliament for adoption. From 22.2.2010 the minimum wage, for paid work from the 1st of March 2010 amount to 734,15 euros (gross wage), which in net wage amount to 562,07 euros.

MDG 2 – Achieve universal primary education

1) People from which population groups are most likely to drop out of primary school in your country and why?

Basic education successfully completed by 19,260 pupils in 2009. Education in elementary schools with regular curriculum was successfully completed by 18,770 pupils, in elementary schools with special curriculum by 250 children and in elementary schools for adults by 240 students.

4% of all pupils in the final grade had at the end of the year an improvement exam in one or more subjects, 90% of them successfully improved negative marks. In 2009, a bit more than 1% of pupils among those who in this year completed elementary school obligations left education without receiving a school leaving certificate.

Compulsory basic education for youth and adults, Slovenia, end of the school year 2008/09

	Schools and branches	Class units	Pupils	Persons who left elementary school	
				successfully completed elementary school	without completion
Total	878	8,884	164,811	19,254	233
Elementary schools	790	8,478	161,695	18,772	201
Elementary schools with special curriculum	58	274	1,589	241	17
Elementary schools for adults	30	132	1,527	241	15

Statistical Office of the Republic of Slovenia

According to EUROSTAT data, Slovenian is highly above the EU-27 average in the area of education. The share of people from 22 to 24 years of age who completed secondary school was 90.2 % in 2008, and the EU-27 average was significantly lower, namely 78.5 %. On the other hand, Slovenia can boast a low share of dropouts. In 2007, the share of dropouts was estimated at 4.3 % in Slovenia, and the EU-27 average was 15.2 %. These data have been calculated (not directly obtained, as there is no unified methodology; the early school leavers come from the population aged 15, with no completed compulsory education, which is in our case the grammar school).

Despite the fact that one can not talk about serious problems with early school leavers in Slovenia, one can expect that during economic crisis the number of young people will increase due to many reasons, among them deteriorated social conditions and lack of motivation. According to last PES data, the number of young people, included into PLYA project, which is part of Active labour market policy measures, is increasing. (PLYA - The programme arose primarily as an answer to the growing number of young people who were without (any) school education, dropouts or unemployed. On one hand, the programme presented a response to the transitional crisis of Slovenia after 1991, since in the framework of restructuring, the number of redundancies has grown drastically, and on the other hand, due to economic stagnation, new workplaces (of all the qualification structures) were not opening for young people.

2) Please describe specific social protection policies and programmes that have been put in place to prevent school drop-outs among the most vulnerable

The Project Learning for the Young (PUM) presents an important programme of social integration of young people, and has already risen in 1999 as a reaction to the existing economic conditions. It is

intended for young people from 15 to 24 years of age; a smaller proportion of young people are older than 25 years. PUM presents a programme in the framework of programmes for increasing social inclusion; namely, it includes activities that help participants to improve their general knowledge and flexibility of mind, and to acquire functional knowledge, necessary for successful reintegration into the school environment and everyday life. The inclusion is carried out on the basis of an employment plan. **We were mainly encouraged to prepare the programme by the fact that more and more young people are dropping out of regular schooling, and there are no comprehensive solutions for effective social reintegration of disregarded youth on the margins of society.**

The **PUPO programme**, which raises measures for the Prevention of Drop Out is a programme that has been implemented in Slovenia in twenty vocational schools. Its aim is to prevent drop outs in the vocational secondary schools.

There are also programmes to tackle poverty and social exclusion, which also include measures to prevent school drop-outs among vulnerable groups

MDG 3 - Promote gender equality and empower women

1) From which population group are girls and women least likely to attend secondary or tertiary education and to work in wage employment?

Thirty-five years ago every 50th woman had tertiary education, while today it is every fifth. Thirty-nine years ago only a fifth of women had more than elementary education, 30% had no education or unfinished elementary education and only about 2% had post-secondary education?

In time the situation changed drastically so that at the 2002 Population Census only a tenth of women in Slovenia had less than elementary education. According to data for 2008, the share is about 5%, while more than half of women in our country have upper secondary education. In 2008, in the age groups 20-24 93.6% of women in Slovenia had at least upper secondary education (in EU-27 81.48%). In the same age group, 87.4% of men in Slovenia (and 75.7% in EU-27) had at least upper secondary education.

Educational structure by age groups

The 2008 Labour Force Survey showed the most favorable educational structure for women in the age group 25-34. In this age group 92.2% of women (and 90.8% of men) had at least upper secondary education, of which 38.4% women (and 22.4% men) had tertiary education.

On average, people aged 55-64 had the lowest education; 64.4% of women (and 78.6% of men) in this age group had at least upper secondary education and 15.5% of women (and 16.6%) of men in this age group had tertiary education.

Leaving school early

Slovenia is among the countries with a very low share of young people who have only finished elementary school (or not even that) and do not participate in education (in 2007 the average for EU-27 Member States was 15.2%). Of course, in Slovenia too some of them leave school early. In 2008, less than 3% of women (and 7% of men) in the age group 18-24 left school early.

Ever more girls decide to continue studies after completing upper secondary education

By 1980, women in Slovenia were a minority among students; in the 1950s women represented less than 30% of the student population. After 1980 the situation changed and in the 2007/2008 academic year almost 60% of students were women. Among 98,128 students in higher education programmes at universities and single higher education institutions in the 2008/2009 academic year, 60% were women.

Female scholarship recipients

In 2008, 35% of female upper secondary school pupils and 22.5% of female tertiary students were receiving scholarships.

2) Please describe social protection policies and programmes that facilitate access for the most vulnerable women to secondary or tertiary education and wage employment?

In Slovenia the two sexes are guaranteed equal access to education; more balanced participation of girls and boys in school and extra-curricular activities is also supported through various activities.

Through various activities the competent ministry and governmental services have increased the level of information for awareness of employers and employees on the importance of elimination of gender based differences in the labour market as a tool to create economic growth and stimulate socially inclusive economies, of attaining and preserving good quality jobs, taking into account the modernization of the social security system, of better reconciling work and family life, of prohibiting discrimination when publishing vacancies, employing and promoting; and of protecting from sexual harassment at work, etc.

In recent years, the employment gap between genders in Slovenia has remained above 10 percentage points; from 2005 to 2009, it even increased by one percentage point (difference ranging from 11.68 to 12.94 and even 13.28 in 2007).

The gender difference is most notable among self-employed persons, among whom the difference amounts to 43 percentage points since an extremely low number of women choose to work as sole traders or farmers, whilst the difference in the field of self-employed persons who perform a registered professional activity is lower and has been substantially reduced in recent years (from a difference of 15.25 in 2005 to 9.81 % in 2009).

The employment rate did not change between 2004 and 2008; however, the employment rate of women increased slightly, by 1.2 %. The biggest difference in employment rates between genders appears in the population aged 50-64, among whom the rate of activity of women increased by 3.9 % in the period 2004-2008 although a gap exceeding 15 % between the genders has nevertheless remained (in 2008, the employment rate of men amounted to 58 % whereas that of women was 41.5 %). On the other hand, the trend in employment turned to the advantage of women in the last year.

With regard to the difference in access to employment and equal pay, the ministry responsible for labour carried out a programme, Assistance in the Employment of Long-term Unemployed Women in 2005 and 2006. In 2008, the percentage of registered unemployed women decreased and in 2009, it was even lower than the percentage of unemployed men (in 2009, 50.87 % of unemployed people were male and 49.13 % female; in the first two months of 2010, the difference increased – 52.73 % of men and 47.27 % of women). Unfortunately, there is still a pay difference also because jobs in industries in which women predominate have lower added value and, consequently, lower personal income.

MDG4 (reduce child mortality), MDG 5 (improve maternal health) and MDG 6 (combat HIV and AIDS, malaria and other diseases)

Infant mortality in Slovenia has decreased significantly during the last decade. In 2007, there were only 2.8 dead newborn babies per 1,000 live children, which classify Slovenia among the most successful EU countries. In 2008, the infant mortality rate was somehow, according to preliminary data, even lower. The most frequent causes of infant mortality are conditions that arise in the antenatal period, particularly problems with premature babies and congenital abnormalities.

Table 10. The number of deaths of children and the mortality rate of children younger than 18 years (per 1,000 children in the age group) by age group, Slovenia 2004-2007.

Age groups	2004		2005		2006		2007		2004-2007	
	No. of deaths	Rate								
Less than 1 year	66	3,75	75	4,15	64	3,47	55	2,81	260	3,53
1 to 4	17	0,24	21	0,29	10	0,14	18	0,25	66	0,23
5 to 9	11	0,12	9	0,10	10	0,11	10	0,11	40	0,11
10 to 14	19	0,18	15	0,15	12	0,12	14	0,14	60	0,15
15 to 17	20	0,27	25	0,34	20	0,29	23	0,35	88	0,31
Total	133	0,37	145	0,41	116	0,33	120	0,35	514	0,36

Source: Institute of Public Health of the Republic of Slovenia.

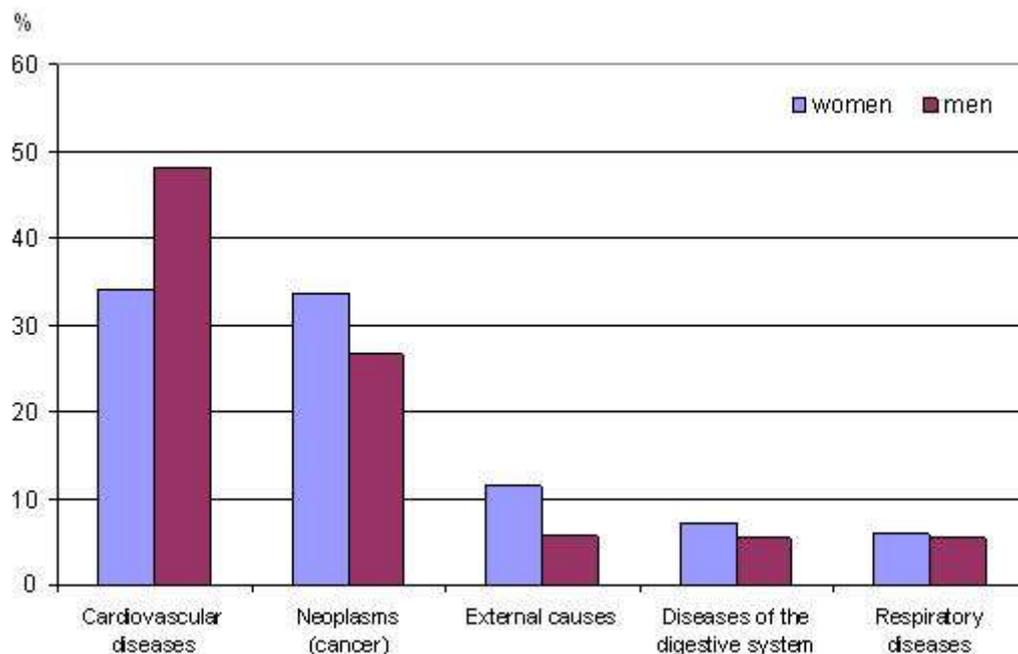
Life expectancy at birth is increasing

In 2006, life expectancy at birth in Slovenia was 78.8 years, while in 1996 it was 3.6 years shorter. With unchanged mortality rate it is expected that girls born in 2006 will live 82.0 years and boys 74.5 years. Between 1986 and 2006 life expectancy at birth was extended by 6.1 years for men and by 5.6 years for women.

Main causes of death in 2007

In the last quarter of a century the most common cause of death, which has by far exceeded all other causes both in the EU-27 and in Slovenia, was cardiovascular diseases, representing 40% of all deaths or about two million deaths per year? The second most common cause of death was malignant neoplasm's (cancer), representing 30% of all deaths and 3.2 million new cases in Europe every year; most frequent types of cancer are breast cancer, cancer of the colon and rectum, and lung cancer.

The five most common causes of death in Slovenia in 2007



Source: Institute of Public Health of the Republic of Slovenia, The database of the deceased

Pursuant to the Health Care and Health Insurance Act, compulsory health insurance covers the total population of a country. Compulsory health insurance excludes only persons who do not have permanent residence on the territory of the republic of Slovenia. However, these persons are also provided with emergency health care. Curative treatment at primary level health care includes also the prevention of cardiovascular diseases, fully financed from funds allocated for basic health insurance, and is, thus free of charge for all users. Within this preventive programme, preventive examinations of

the entire population within specific age are conducted on a regular basis by a chosen physician and on the basis of which, risk assessment is made as of the risk level of an individual for the development of cardiovascular diseases. According to the level of risk, appropriate steps are taken. In this area, health care centers provide a range of health education activities, equally accessible to all male and female inhabitants in Slovenia.

The Republic of Slovenia ensures the right to overall preventive medical care for women in relation to reproductive health, pregnancy and childbirth. The objective of such preventive programmes is to lower the risk of diseases associated with reproduction, unplanned and unwanted pregnancies, early detection of cancer, exercise of reproductive rights, and reproductive health promotion. The following programmes are being carried out:

- examinations and advice for family planning, use of contraception against sexually transferable infections and resulting infertility. Prescribed contraceptives are paid for with the funds of mandatory health insurance.
- preventive examinations during pregnancy – 10 periodic health examinations in total – at least two ultrasound scans, individual counselling and laboratory tests (as well as examinations for syphilis, toxoplasmosis and hepatitis B). Examinations are carried out by gynaecologist's teams in medical centres.
- for pregnant women aged between 35 and 37 years, the screening test for Down syndrome is performed, and for pregnant women aged above 37 an amniocentesis is also administered;
- examinations and counselling after confinement, spontaneous and legal abortion, and after extra-uterine pregnancy;
- examinations and counselling in relation to menopause;
- preventive activities for the protection of health in home nursing activity (preventive visits for pregnant women, neonatal mothers and newborns by community nurses);
- early detection program for pre-malignant and malignant changes in the cervix (ZORA programme).

During the period 2004-2007, about 135 gynaecological teams in medical centres, private clinics and gynaecology and maternity departments of hospitals were carrying out primary reproductive medical care for women. Thus, the gynaecological team provided medical care for, on average, somewhat less than 6,500 women over the age of 15.

In the period 2004-2007, during a pregnancy, each pregnant woman had, on average, 9.8 examinations, which is about two more than 10 years before. During the said period, only 0.3-0.5% of women giving birth had no examinations during their pregnancy. Two thirds of pregnant women attended antenatal classes; women pregnant for the first time had 80% attendance at the classes. The majority of pregnant women (99.8 - 99.9%) gave birth in one of 14 maternity hospitals.

In the period 2009-2011, Slovenia is also participating in the international project to create a database of good practices promoting equality in the field of health. Special attention is devoted to women's health during pregnancy, and during post-delivery period since suicide has been recorded during these periods.

MDG 7 - Ensure environmental sustainability

1. In Slovenia biodiversity loss does not represent a substantial problem so no special population group is affected by it. Slovenia as a country with rich water resources does not have problems with water supply neither so access to the drinking water is not a major problem.

2. As stated above these problems do not represent major problems in Slovenia so there are no specific programmes in this regard. In Slovenia there are no classic slums so we do not have slum dwellers.

Only regarding housing problems of underprivileged people we can give you more concrete answer: according to the Housing law there is a mechanism to help people solving this problem at list temporarily. The communes are responsible for obtaining and renting so called "housing units". It means a built or mobile place which serves for temporary solution of underprivileged people's housing needs. There are different types of housing units: a unit may have a bathroom and kitchenette, tenants may share bathroom or kitchen etc..

Communes currently dispose of 300 housing units but due to the effects of global crisis more would be needed.

The intention of this concept, provided by Article 88 of the Housing law, is to prevent situations of homeless people and to help the people in the worst social and material situation in this regard.

To obtain such a housing unit interested person is not obliged to enter a competition for it but the communes deliver these units according to availability of housing units on one side and demand on the other side. Citizenship of the Republic of Slovenia is not a condition for acquiring a housing unit.

A tenant of a housing unit could apply for subsidized rental, if he or she fullfils certain conditions regarding income and property .

3. It is difficult to answer this question since we can not measure influence in decision-making process.

MDG 8 - Global partnership for development

Slovenia is a donor, not a recipient of ODA.