PERMANENT MISSION OF MONTENEGRO TO THE UNITED NATIONS OFFICE AND OTHER INTERNATIONAL ORGANIZATIONS IN GENEVA

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The Permanent Mission of Montenegro to the United Nations Office and other International Organizations in Geneva presents its compliments to the Office of the High Commissioner for Human Rights and has the honour to convey the Written Replies to the Questionnaire concerning the HRC Resolution A/HRC/29/15 on human rights and climate change.

The Permanent Mission of Montenegro to the United Nations Office and other International Organizations in Geneva avails itself of this opportunity to renew to the Office of the High Commissioner for Human Rights the assurances of its highest consideration.

Geneva, 11 November 2015

Office of the High Commissioner for Human Rights
Geneva

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Questionnaire

1. Please describe, in your view, the relationship between climate change and the enjoyment of the right to health and any human rights obligations to mitigate and adapt to climate change that can be derived therefrom.

Climate change acts as the threat multiplier and has negative impact on society's ability to cope with problems it faces. Climate change therefore significantly influences the state and quality of the provision and enjoyment of the human rights i.e. to healthy and clean environment, right to health etc. Obviously, it asymmetrically more affects vulnerable segments of the society compared to others. Any society therefore has to take into account vulnerabilities and risks posed by climate change and include them into sectoral development strategies. Human rights considerations of climate change should be at the heart of future global and national agreements in this field.

2. Please share a summary of any relevant data on the impacts of climate change on the enjoyment of the human right to health including its underlying determinants (education, water and sanitation, food, housing, etc.), disaggregated to the extent possible.

Thus far Montenegro has conducted some assessment of vulnerability of the health sector to climate change within its National communications to UNFCCC (two NC submitted so far) and has identified health as the priority sector for adaptation to climate change. However, the practical implementation of adaptation actions and monitoring and measurement of such actions is at early stage. From the standpoint of the “human rights - health sector” relationship, Montenegro is not yet sufficiently capable for more detailed reporting.

3. Please describe existing national commitments, legislation and policy frameworks related to climate change mitigation and adaptation including any specific measures intended to prevent the worst impacts of climate change on the right to health; to ensure access to information, transparency, participation, and other procedural rights of persons affected by climate actions; to promote, protect and fulfil all human rights particularly those closely linked to the underlying determinants of health such as food, water and sanitation, housing, etc.; and to ensure that climate-related actions respect, promote, protect and fulfil human rights. Please share any relevant information on the implementation of existing commitments to address climate change and its impacts.

The most recent policy document which is significant for climate change mitigation, is Montenegro’s Intended nationally determined contribution (INDC) submitted to the UNFCCC Secretariat in September 2015. With this plan Montenegro sets ambitious goal to cut emission levels 30% by 2030 compared
to 1990 levels. Along with this document, policy framework consists of National Strategy for Climate Change by 2030, adopted by the Government in September 2015 and National energy legislation which prescribes 33% mandatory share of renewable energy sources by 2020, and 9% of energy efficiency target by 2018. Currently Montenegro does not have National Adaptation Plan and it is focusing its efforts in order to develop this document which will assess society-wide vulnerability and risks to climate change, including health sector.

4. Please describe any relevant national accountability and oversight mechanisms designed to ensure access to remedy for those who suffer human rights harms as a result of climate change. Please highlight any relevant jurisprudence on this subject and indicate what measures, regulatory or otherwise (i.e. impact assessments), are in place to prevent harms caused by third parties.

Other than mechanisms normally prescribed by the Constitution and enforced by national institutions in terms of public security, disaster risk reduction and preparedness, and other security mechanisms, there are no specific remedy mechanisms for climate change related threats. However, the National Council for Sustainable Development and Climate Change has designated working group for Climate Change, where matters of importance and concern can be conveyed and discussed and actionable conclusions adopted. This mechanism can be used in the future as the facilitator for further actions in this field.

5. Please describe any concrete mitigation and adaptation measures being taken to address the impacts of climate change on the human right to health and good practice in this regard including those related to: international cooperation; local and community-based initiatives; private sector initiatives; development, application and diffusion of technologies, practices and processes that control, reduce or prevent anthropogenic emissions of greenhouse gases; and the exchange of relevant scientific, technological, technical, socio-economic and legal information related to the climate system and climate change and the economic and social consequences of various response strategies.

Institute for Public Health of Montenegro in cooperation with GIZ (German International Cooperation) has addressed human health and climate change within project Climate Change Adaptation in Western Balkans (CCA WB). Activities consisted of a public campaign aimed to inform and raise awareness among the population about impacts of climate change / heat waves on health with a special focus on vulnerable groups (children, elderly people, pregnant women, chronically ill, socially vulnerable, and workers in specific working conditions). The campaign consisted of dissemination of educative leaflets through two most popular newspapers twice, during July and August, and distributing educative posters in each Health and Red Cross centres in the country.