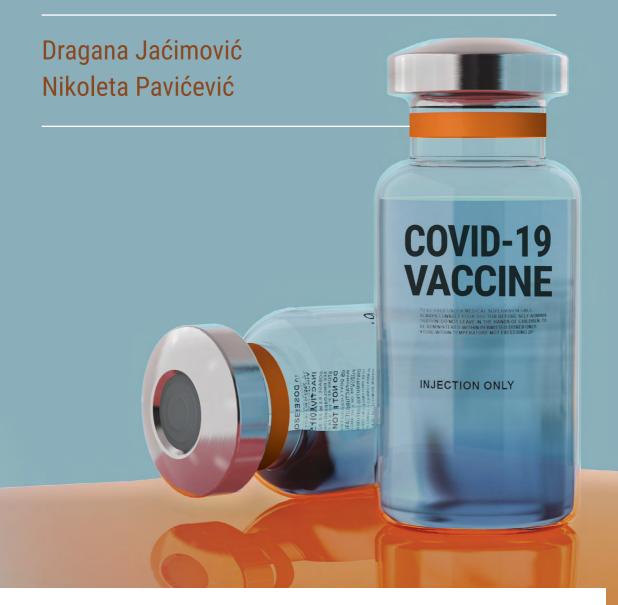
# PANDEMIC MANAGEMENT LESSONS LEARNED FOR A MORE SECURE FUTURE



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#### **MONTENEGRO**

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#### Methodology

This analysis is based on the desk research aimed at assessing how Montenegro managed its response to the COVID-19 pandemic. The research team collected and analysed publicly available data and national statistics, as well as data from international organizations and media reports. This analysis also covers the level of coordination of all relevant national public institutions included in pandemic management and cooperation with global health institutions.

#### Background

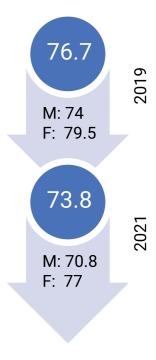
COVID-19, an infectious disease caused by SARS-CoV-2 virus<sup>[1]</sup>, was first identified in December 2019 in Wuhan, China. The wider spreading of the novel virus to other countries followed shortly after and resulted in the World Health Organization (WHO) declaring a pandemic<sup>[2]</sup> in March 2020. Given the urgent need to develop a response to the pandemic, countries and pharmaceutical companies joined forces to bring forth the administration of the first COVID-19 vaccines just one year after the first case was confirmed, in December 2020.<sup>[3]</sup> According to the WHO data, from the beginning of the pandemic till the end of 2022, there were 731 million confirmed cases, including 6.7 million deaths, while a total of 13 billion vaccine doses were administered.<sup>[4]</sup> Currently, the pandemic is still ongoing and marked as a threat, having in mind a still high number of deaths and insufficient vaccine uptake.<sup>[5]</sup>

#### Context

The first two cases of COVID-19 in Montenegro were registered on 17 March 2020, more than two months after the outbreak in Wuhan. The pandemic in Montenegro was officially declared on 26 March 2020. After this, the number of cases varied, transitioning Montenegro from 'COVID-19 free' to the country with the highest infection rate in the world. The first year of the COVID-19 pandemic in Montenegro was followed by a change of government after 30 years, violation of human rights and rights guaranteed by the Constitution of Montenegro<sup>[6]</sup>, when all the weaknesses of the institutions were revealed.

#### **Analysis**

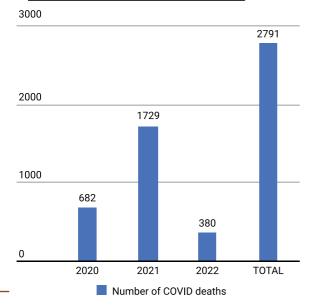
The Government of Montenegro adopted the WHO's recommendations before the first registered case in the country, and introduced preventive measures, which were tightened as the first COVID-19 cases began to be registered. Key government measures were related to the closure of border crossings, health and sanitary supervision for passengers from specific countries, prohibition of public gatherings, closure of educational institutions, overnight and weekend curfews, prohibition of work with a few exceptions, mandatory masks, prohibition of inter-city traffic, etc.[7] The Government of Montenegro also organised air transportation for repatriation of its citizens abroad. Measures were usually updated weekly, which was amended to bi-weekly updates from May 2021. Depending on the fluctuation of registered cases, the said measures applied to the entire territory of Montenegro or differed from city to city. The key legal grounds for COVID-19 management in country was the Law on Protection of Population against Communicable Diseases, while the National Coordination Body for Communicable Diseases (NCB) had the main responsibility for pandemic management.



Graphic 1: Life expectancy

Total number of registered Covid-19 cases (2020 - 2022) **284 756** 

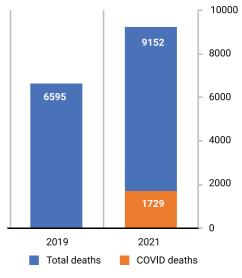
Montenegro is a small country with 619 211 citizens<sup>[8]</sup>, with an average life expectancy of 73.8 in 2021, which is a 2.9 year drop from pre-COVID-19 life expectancy of 76.7 (see Graph 1 above).



During the period 2020-2022, Montenegro registered a total of 284,756 COVID-19 cases and 2,791 Covid-19 deaths. [9] Compared to 2019, the number of total deaths increased by 2,557 (see *Graph 3 below*)[10].

During the data collection process on COVID-19 deaths, the research team noted that statistics published by the Institute for Public Health of Montenegro (IPH) and statistics of the World Health Organization (WHO) on Montenegro differed.

According to the data published on the official websites of the IPH and the WHO, there is a lag in Montenegro's reporting to the WHO, since the data show a two-day difference (see *Table 1*). This may imply that there are certain weaknesses in the reporting system from the national authorities to the WHO. In the meantime, the numbers have evened out, since the total number of COVID-19 deaths from IPH and WHO as of 31<sup>st</sup> December 2022 coincides.



Graphic 3

Table 1	Number	Institute for Public Health	World Health Organization	
Covid-19 deaths in 2020	682	31st December 2020	2 <sup>nd</sup> January 2021	2 days difference
Total Covid-19 deaths on 31 <sup>st</sup> December 2021	2411	31st December 2021	2 <sup>nd</sup> January 2022	2 days difference
Dates with the highest number of Covid-19 deaths	18	8 March 2021 17 March 2021	10 March 2021 19 March 2021	2 days difference

#### Vaccination

The vaccination against COVID-19 in Montenegro started on 20 February 2021. Until 15 February 2023, 46,1% of citizens have been fully vaccinated with two doses (47,3% with at least one dose) out of the total population. If we look at the statistics related only to the adult population, 59,6% of citizens were vaccinated with two doses, while 61,2% of them were vaccinated with at least one dose. Montenegro approved Oxford-AstraZeneca, Pfizer-BioNTech, Sinopharm (Beijing), Sputnik V, Johnson & Johnson, and Sinovac-CoronaVac vaccines. Even though Montenegro is a part of the COVAX (COVID-19 Vaccines Global Access) initiative as a self-financing partner, the largest number of vaccines is provided through donations. In total 665,840 vaccines were donated to Montenegro. This number is calculated based on information from the official announcements of the Montenegrin Government, since there is no information on the total number of donated vaccines. Trail First vaccine donations arrived in Montenegro from Serbia, while Hungary, France, Poland, and Turkey donated the largest number of vaccines (see Annex I). On the other hand, Montenegro donated vaccines only to Kosovo (400). Reasons for donations to Montenegro were mainly maintaining good bilateral relations,

expression of mutual trust and good cooperation. An additional reason is that Montenegro is a participating country in different programs such as the COVAX initiative and a candidate country for EU. On the other hand, the pro-Serbian party Democratic Front characterised Montenegro's donation to Kosovo as an anti-Serb move<sup>[13]</sup>. The process of procurement of vaccines was not fully transparent and it was followed by mutual accusations between the former and incumbent Minister of Health, due to the change of the Government.<sup>[14]</sup>

#### **Equipment and Medical Personnel Capacities**

The weakness of Montenegrin health institutions is reflected in the ranking of healthcare systems in 2021. Montenegrin healthcare system is among the worst in South-Eastern Europe, taking 21st place out of 23 countries. In Global ranking, Montenegro is positioned as 61st out of 167 countries. The number of hospital beds per capita in 2019 was 3.86 (386 beds per 100,000 population). According to the official data, at the beginning of the pandemic, Montenegro had 70 respirators. By April 2020, the health institutions were additionally equipped, after which there were 151 ventilators at their disposal. There was a "war over ventilators" in the global market, accompanied by numerous frauds, which did not bypass Montenegro either. Montenegrin institutions contracted urgent procurement, without specifying the delivery date, and many contracts have been changed or canceled. Moreover, health institutions could not use half of the ventilators urgently procured during the pandemic, since they were not functional. This was an additional reason for dispute between the previous and the new leadership after the change of government in 2020, in which the Prosecutor's Office was also involved. In the meantime, these criminal charges were dismissed. [18]

Montenegro faced with a lack of strategy, staff and medical consumables at the begging of the pandemic. There was a shortage of masks, not only for citizens, but also for medical personnel. In March 2022, the Government urged pharmacies to give all necessary equipment to medical institutions. Medical workers operated in unfavourable conditions and were forced to reuse disposable protective equipment for several days. The health institutions conducted urgent procurement procedures to purchase medical equipment and tests. The lack of protective medical equipment and tests was addressed thanks to donations from France, Türkiye, China, Germany, the WHO and EU, among others. When it comes to the EU support, three million euros in form of emergency support was allocated from the Instrument for European Integration, which forms an integral part of the IPA 2018 program.<sup>[20]</sup>

When it comes to personnel capacities, before the pandemic, the list of deficient occupations in 2019 included anesthesiologists and reanimation specialists. At the beginning of the pandemic, a representative of the IPH claimed that there were enough epidemiologists, since there were one or two epidemiologists in all respective

municipalities in Montenegro. According to the representative of the Labor Union of Montenegrin Physicians (TUMP), there were a total of 42 epidemiologists in country. In July 2020, the entire PCR diagnostics were run by three doctors – one epidemiologist and two molecular biologists, and by 8 to 10 technicians, she claimed.<sup>[21]</sup>

"The lack of medical personnel, and therefore of doctors from the preventive branches of medicine, especially epidemiologists, is one of the observed shortcomings in the response to the emergency situation caused by the Covid-19 pandemic."

> Director of Institute for Public Health, January 2023

Montenegro tried to comply with WHO's double-track pandemic recommendations, which meant that while the system struggled to respond to the crisis through testing, supervision and other activities related to prevention and suppression of the virus, the state needed to continue providing essential services. The second track turned out to be a difficult challenge, not only for Montenegro but also for other larger and stronger administrations. Thus, as a consequence in Montenegro, for example, the tuberculosis detection rate fell by 10%, MMR vaccination coverage rate fell to 12.07% in January 2023. According to the data of non-governmental organisation CAZAS on health services during the pandemic, outpatient examinations were canceled, cancer screening and mammography as preventive mechanisms were stopped as well, which affected the provision of primary protection as well as prevention. [22]

#### Cooperation with International Actors

We can conclude that Montenegro has a very good cooperation with the UN, WHO and the EU, which was demonstrated through numerous joint activities and projects carried out during the pandemic. The head of the WHO Office in Montenegro was very present in media, communicating the WHO's recommendations to citizens through TV talk shows and other media appearances. UN and the Government of Montenegro worked together on the National Plan for Preparedness and Response of Montenegro to COVID-19; the preparation of an activity plan for the absorption of the United Nations' assistance to Montenegro in the fight against the spread and consequences of the coronavirus<sup>[23]</sup>; the two cycles of rapid assessment of the social impact of COVID-19 on particularly vulnerable population groups were conducted.<sup>[24]</sup> The WHO also enabled online courses on the prevention and control of COVID-19 for health workers.<sup>[25]</sup> During the pandemic numerous meetings with WHO representatives were held. The WHO Office in Montenegro is the implementor of the project aiming to strengthen the capacity

to provide a response to COVID-19 in Montenegro. The donor of the project worth 2.7 million dollars is the US Government. The IPH also organised trainings for journalists on the COVID-19 immunization, supported by UNICEF and the British Embassy. The WHO praised Montenegro for implementing comprehensive measures in accordance with the WHO's recommendations. Two years after COVID-19 outbreak, medical workers of Montenegro received a special prize from WHO in honour and recognition of their contribution to preserving the health and life of citizens during the COVID-19 pandemic. Page 128

#### Communication with citizens

At the beginning of the pandemic, the key national body in Montenegro tasked with providing instructions on prevention of the spread of the novel coronavirus to citizens was the Institute for Public Health.[29] Later, after the decision to set up a coordination body, communication was taken over by the National Coordination Body for Communicable Diseases (NCB). As of 31 March 2020, the NCB held two press conferences per day.[30] At first, media representatives could not attend these press conferences in-person; instead, they were able to submit questions through a platform that was established. Journalists assessed that the Government centralised information, providing responses only to the questions they deemed appropriate. [31] Some of the journalists even complained that the questions they were asking through the platform were not mentioned during the daily conferences that the NCB held. [32] Additionally, as time went by, epidemiologists warned that these press conferences were counterproductive since they were not used for educational purposes, but rather to create stigma and intimidation among citizens.[33] This was supported by the Media Institute's research which showed that the comments on the media websites and their social networks revealed the public confusion about the measures, which were imprecise, and that this is why comments of the citizens soon turned into extremely negative ones.[34]

# Impact of political and social dynamics on pandemic management

During the pandemic, parliamentary elections were held in August 2020, when the ruling Democratic Party of Socialist (DPS) lost power after 30 years. The parliamentary elections were held simultaneously with the local elections in five municipalities. Elections were organised under special conditions, due to the COVID-19 pandemic. The change of Government also affected the pandemic management. After the elections, the NCB continued to work regularly until the beginning of December 2020. On 3 December, the president of the NCB (Minister of Health at that time) held the last session and issued a decision on the termination of the work of the NCB. One day later, the new Government was elected. The new Government formed the Council for Fighting Corona-Virus with a different composition (a comparison in composition of the NCB and the Council is available in Annex II). Alongside this, the Special Commission of the Ministry of Health and health institutions was formed. [35] During the pandemic, two different governments used two different approaches. In 2020, the former government decided to close borders for most of the countries with high rates of infection, which resulted in decrease of income from tourism. The newly established Government took an entirely different approach, lifting all bans and opening borders for tourists, although this resulted in a rising number of cases in the country. [36]

The Army of Montenegro was engaged in ensuring the physical protection of facilities where quarantine measures were implemented, and later in sharing protective masks and disinfectants, while a military helicopter was also available in case of medical evacuation. The implementation of the orders and measures of the Government of Montenegro to suppress the spread of COVID-19 was controlled by the police.

### False news and disinformation

In Montenegro, there were no formal structures, such as parties, media or organizations, which were spreading false news concerning COVID-19. The key sources of disinformation about the virus and the vaccines were certain foreign tabloids and individual accounts on social media networks. However, although all countries across the globe had to counter false news related to COVID-19, Montenegro went too far and even undermined human rights in trying to curb the spread of it. Just in the first two months after registering the first COVID-19 case, five criminal proceedings were initiated against citizens for causing "panic and disorder" on social media networks. In four of these cases, criminal proceedings were initiated because these persons were discussing, on social media networks, the extent to which the population was

infected with COVID-19.<sup>[37]</sup> In one of the cases, a former opposition activist was arrested due to posting information about the president of Montenegro being COVID-19 positive, even though he shared a link to a news article published by a tabloid from Serbia.<sup>[38]</sup>

During the pandemic, civil society organizations (CSOs) such as Human Rights Action pointed out that in Montenegro there were no definitions of "false news" or "panic", so they could be abused by the authorities. [39]

#### Rule of Law during pandemic

On the pretext of curbing COVID-19 spread, the Government of Montenegro suspended the rule of law during the pandemic. Although the state of emergency has not been introduced to date, the Government restricted freedom of movement, banned inter-city traffic, introduced nighttime curfews and restricted or even banned public assemblies immediately after the first registered case. [40] Moreover, the institutions that are in charge of oversight of the Government's measures, were not doing their job properly in protecting the Constitution and human rights. It took more than a month from the beginning of the pandemic in Montenegro for the Parliament to hold a session. This resulted in the European Parliament urging the Government to ensure the constitutional role of the Parliament in overseeing the introduced measures. Allegedly, one of the reasons for not holding the session was the spacial capacity of the hall, while on several occasions only certain parliamentary committees and the Collegium of the President of the Parliament held sessions.[41] Additionally, although the Alternative Institute and Human Rights Action filed an initiative to the Constitutional court of Montenegro to review the constitutionality of banning public assemblies in Montenegro for several months, it took 10 months for the Constitutional Court to decide upon this initiative, thus leaving the measure in force. [42] These and other mentioned events, combined with the inactivity of public institutions during the violation of the Constitution and suspension of the rule of law, resulted in Montenegro losing its status of a democracy in the Freedom House Report for the first time since 2003; instead, Montenegro degraded to a "hybrid regime".[43]

#### Negative practices during pandemic in Montenegro

The most severe scandal that occurred during the pandemic in Montenegro, concerns the Government's decision to publish a list of persons who were ordered mandatory isolation due to being abroad. [44] The Government stated that it was not able to guarantee the respect of the order by over 2,000 citizens who were in isolation back then. Instead, the Government announced on Twitter "Tonight NCB will start publishing the identities of persons who are ordered self-isolation. Let each citizen in Montenegro know, who of their fellow neighbors and citizens puts them at risk". [45] And while Bosnia and Herzegovina's Agency for the Protection of Personal Data ruled against a similar decision in their country and demanded the removal of published information, the Montenegrin Agency for Personal Data Protection gave support to the Government to publish this data. [46] Civil Rights Defenders called upon Montenegro to respect the right to privacy, reminding that the European Court of Human Rights had ruled that "the right to privacy specifically applies to protecting the confidentiality of data relating to viruses, since disclosure of such information can have detrimental effects on the private and family life of the individual and his or her social and professional position, including exposure to stigma and possible exclusion from the community."[47]

Nevertheless, the Montenegrin Government continued publishing data that contained names and surnames, addresses and ages, and in some cases even Unique Personal Identity Numbers or ID numbers. After this data was made public, unknown authors designed an application "crnagorakorona.com" that could track all of the persons in self-isolation, and that contained geolocation. This stimulated Twitter discussions and motivated the citizens to self-mobilize online in order to start monitoring those who were ordered self-isolation and verify whether they were respecting the order. The Center for Civic Education (CCE) submitted initiatives to the Supreme Court of Montenegro, the Police Administration and the Agency for Personal Data Protection to undertake actions and measures ex officio in order to suppress the further use of the illegal web application. This was followed by 2,720 persons filing lawsuits against the state for publishing their personal data, and the state having to pay damages of 300 euros to each, or 816,000 euros in total. [50]

Another large scandal related to COVID-19 management in Montenegro, occurred when the list of those who were infected was leaked. The list was shared by a Public Health Institute's employee via WhatsApp and became viral on the internet. The employee was later arrested, and criminal proceedings were initiated against him for the commission of the criminal offense of "Unauthorized Collection and Usage of Personal Data". After detention, the decision of the Basic Court was redressed, but there is no new information on the trial and the final decision in this case to date. [51]

#### Conclusions and Recommendations

Although Montenegro handled the COVID-19 crisis effectively in the early beginnings, having in mind that the first measures were introduced even before the first case was registered, as the time went by, systemic flaws were revealed. The fact that two different governments were in power during the COVID-19 crisis in Montenegro, reflected on the extent of oppressiveness of the introduced measures and resulted in different approaches. Citizens highly supported severe measures during the first wave of the pandemic, but support for the measures declined as the time went by. Selective information sharing, unclear communication of measures, violation of human rights and breaching of the Constitution contributed to the negative public attitudes towards the relevant authorities. Lack of institutional proactivity in oversight of Government's decision-making was obvious with regards to the Parliament, the Constitutional Court and the Agency for Personal Data Protection, who failed to protect the rights of the citizens of Montenegro. When it comes to the procurement of vaccines, protective equipment and COVID-19 tests, at first Montenegro mainly relied on donations from other countries and organizations. Later the purchases of these means were conducted through non-transparent and partly unsuccessful procurement procedures. However, the cooperation with WHO and EU was on a high level, demonstrated through joint activities and projects carried out throughout the pandemic.

- The Constitutional Court should monitor the constitutionality and legality of enforcement of proposed and introduced public measures and inform the Parliament of the registered cases of breaching, especially in times of crisis;
- Restricting measures introduced by the Government must be designed in such a manner that they do not violate human and civil rights and that they are proportionate to the risk, in this case a virus;
- The Government should strengthen the capacities of medical staff, particularly epidemiologist, for detection and collection of epidemiological data by increasing the number of employees and allocating a larger percentage of budget to the health sector; and improve medical equipment, especially regarding hospital beds, protective equipment and tests;
- Clear statistics on vaccines procurement, including those received through donations, should be collected, regularly updated and published to ensure transparency of public spending;
- Reasons for a lag in reporting from Montenegrin national authorities to the WHO should be analysed to neutralise detected weaknesses in the reporting system;
- Good cooperation with WHO and other international organizations should be promoted and continued in the same manner.

#### Annex I Donation of vaccines

Country	# of donated vaccines	Sources
Poland	100,840	Link #1 Link #2
Serbia	14,000	Link #1 Link #2 Link #3
Türkiye	100,000	Link #1 Link #2
Croatia	10,000	<u>Link #1</u>
China	30,000	<u>Link #1</u>
Slovakia	10,000	<u>Link #1</u>
Slovenia	42,000	Link #1
Hungary	200,000	Link #1
France	117,000	<u>Link #1</u>
COVAX initiative	48,000[52][53]	Link #1 Link #2
EU	42,000	Link #1 Link #2

# Annex II Comparison between the compositions of the NCB and Council

## Composition of the National Coordination Body

Ministry of Health, Institute for Public Health, Clinical Center of Montenegro, Administration for Inspection Affairs, Ministry of the Interior, Police Administration, Ministry of Defence, Ministry of Economy, Ministry of Transportation and Maritime Affairs, Agency for National Security, Office of the Prime Minister and Podgorica Capital city.

## Composition of the Council for fighting Coronavirus

Minister of Health, Minister of Defence, Minister of Finance and Social Welfare, Minister of Economic Development, Minister of Education, Science, Culture and Sport, Minister of Public Administration, Digital Society and Media, and Director of the Institute for Public Health

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